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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
WOMEN SPEAK OUT	PAC		
ADDRESS (number and street)	2800 Shirlington Rd		
▼ Check if different	Suite 1200		
than previously reported. (ACC)	Arlington		VA 22206 -   -
2. FEC IDENTIFICATION NU	JMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00530766		IS THIS NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	b 20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Ma	ur 20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15 Quarterly Report (Q		r 20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	(C) 12-Day PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y	E) Electi	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Electi	on on	in the State of
5. Covering Period 09		through 09	30 2021
I certify that I have examined th  Type or Print Name of Treasure	Gross, Jennifer, , ,	f my knowledge and belief it is	true, correct and complete.
Typo of Fillit Name of Heasule			
Signature of Treasurer Gross	s, Jennifer, , ,	[Electronically Filed]	Date 11 / 20 / 2021
NOTE: Submission of false, errone	eous, or incomplete information	on may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
W	rite or Type Committee Name		
V	VOMEN SPEAK OUT PAC		
Re	eport Covering the Period: From:	09 01 2021	To: 09 30 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,  2021		72764.90
	(b) Cash on Hand at Beginning of Reporting Period	6028.79	
	(c) Total Receipts (from Line 19)	12999.00	265060.75
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	19027.79	337825.65
7.	Total Disbursements (from Line 31)	16234.09	335031.95
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2793.70	2793.70
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	183131.18	
	This committee has qualified as a multi	icandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### WOMEN SPEAK OUT PAC

Report Covering the Period: From: 09	01 2021 To	9 30 2021
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	12999.00	189022.91
(ii) Heitaminad	0.00	32322.09
(ii) Unitemized(iii) TOTAL (add	0.00	32322.03
Lines 11(a)(i) and (ii)	12999.00	221345.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	12999.00	221345.00
Totals to Line 33, page 5)	12333.00	221343.00
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
F	222	222
B. All Loans Received	0.00	0.00
L Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	43715.75
6. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	3.00	4 4
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
	0.00	200
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
D. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	12999.00	265060.75
D. Total Federal Receipts	40000.00	207722
(subtract Line 18(c) from Line 19)▶	12999.00	265060.75

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B
	Operating Expenditures:	Iotal This Period	Calendar Year-to-Date
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(/		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	- 14921.47	303446.39
	(c) Total Operating Expenditures	44004 47	303446.39
	(add 21(a)(i), (a)(ii), and (b))▶	- 14921.47	303446.39
	Transfers to Affiliated/Other Party Committees	0.00	0.00
3. (	Contributions to	4 4	
	Federal Candidates/Committees and Other Political Committees	0.00	0.00
	Independent Expenditures	4 1 4 1 4 1 4 1	4 1 4
	(use Schedule E)	31155.56	31155.56
	(52 U.S.C. § 30116(d))	200	
	(use Schedule F)	0.00	0.00
	Loop Donovmento Made	0.00	
.	Loan Repayments Made	0.00	0.00
.	Loans Made	0.00	0.00
.	Refunds of Contributions To:	0.00	4 4
	(a) Individuals/Persons Other Than Political Committees	0.00	430.00
		4 4	4 4
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	430.00
	Other Disbursements (Including		
	Non-Federal Donations)	0.00	0.00
	· · · · · · · · · · · · · · · · · · ·	4 4	
	Federal Election Activity (52 U.S.C. § 30101(20	0))	
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid	0.00	0.00
	Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	5.55	
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
		4 4	4
	Total Disbursements (add Lines 21(c), 22,		
1	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16234.09	335031.95
	Table Fordered Birth	45 45	45 45 45
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
1	from Line 31)	16234.09	335031.95

#### **DETAILED SUMMARY PAGE**

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	12999.00	221345.00
4. Total Contribution Refunds (from Line 28(d))	0.00	430.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12999.00	220915.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	- 14921.47	303446.39
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	43715.75
8. Net Operating Expenditures (subtract Line 37 from Line 36)	- 14921.47	259730.64

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle In Bissonnette, Lisa, , ,  Mailing Address 125 Harrington Street  City Meriden  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Sandoval Veterinary Hospital	State Zip Code CT 06451-5220  C Occupation (for Individual)	Date of Receipt  M M M / D D / 27 2021  Transaction ID : SA11AI.41864  Amount of Each Receipt this Period  Memo Item
Sandoval Veterinary Hospital Receipt For:  Primary General Other (specify) ▼	Veterinary Technician  Aggregate Year-to-Date ▼  45.00	
Full Name of Individual (Last, First, Middle In Borchert, Steven, , ,  Mailing Address 1706 Whitby Avenue  City  Portage	State Zip Code MI 49024-2552	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Fortage  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Retired  Receipt For:  Primary  General	Occupation (for Individual) Retired  Aggregate Year-to-Date	Amount of Each Receipt this Period  25.00  Memo Item
Other (specify) ▼  Full Name of Individual (Last, First, Middle In Curtis, Christina, , ,  Mailing Address P.O. Box 248	itial) or Full Organization Name	Date of Receipt  09 27 2021
City Chloride  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Information requested per best efforts  Receipt For: Primary General Other (specify)	State AZ Zip Code 86431-0248  C Occupation (for Individual) Information requested per best efforts  Aggregate Year-to-Date  30.00	Transaction ID : SA11AI.41867  Amount of Each Receipt this Period  30.00  Memo Item
SUBTOTAL of Receipts This Page (optional)		60.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle Ini Czok, Rev. Robert, W., ,  Mailing Address 7200 Douglaston  City Douglaston  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	State Zip Code NY 11362  C Occupation (for Individual)	Date of Receipt  09 30 2021  Transaction ID : SA11AI.41868  Amount of Each Receipt this Period  1000.00  Memo Item
Reverend Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	St. Anthony Church  Aggregate Year-to-Date ▼  1000.00	
Full Name of Individual (Last, First, Middle Ini  DiLeo, Melanie, , ,  Mailing Address 963 Main Street  City	State Zip Code	Date of Receipt  09 27 2021  Transaction ID : SA11AI.41869
Winchester FEC ID number of contributing federal political committee.	MA 01890-1928	Amount of Each Receipt this Period  5.00
Name of Employer (for Individual) information requested per best efforts  Receipt For:  Primary General  Other (specify) ▼	Occupation (for Individual) information requested per best efforts  Aggregate Year-to-Date ▼  45.00	Memo Item
Full Name of Individual (Last, First, Middle Ini Dobrzenski, Frank, , ,  Mailing Address 5304 Sapphire Springs Drive	itial) or Full Organization Name	Date of Receipt  09  01  2021
City Knightdale  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Expedient Resource Services Receipt For: Primary General Other (specify)	State NC Zip Code 27545-7585  C Occupation (for Individual) Principal  Aggregate Year-to-Date ▼	Transaction ID : SA11AI.41870  Amount of Each Receipt this Period  150.00  Memo Item
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1155.00
TOTAL This Period (last page this line number	only)	

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	and Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Midd Endres, Stephen, , , Mailing Address 105 Charmuth Road	le Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	09 09 2021
Lutherville	MD 21093-5209	Transaction ID : SA11AI.41871  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	35.00
Name of Employer (for Individual) Emory Hill	Occupation (for Individual) CFO	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name of Individual (Last, First, Midd Ford, Sharon, , ,  Mailing Address 130 Doctor Michael Deba		Date of Receipt
City	State 7in Code	09 29 2021
Lake Charles	State   Zip Code   LA   70601-5951	Transaction ID : SA11AI.41872
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  6.00
Name of Employer (for Individual) Home Furniture Co.	Occupation (for Individual) Sales Rep	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  54.00	
Full Name of Individual (Last, First, Midd	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 95 Park Street		09 28 2021
City Essex Junction	State   Zip Code   VT   05452-4124	Transaction ID : SA11AI.41873
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  3.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Small Business Owner	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 27.00	
SUBTOTAL of Receipts This Page (options	al)	44.00
TOTAL This Period (last page this line nur	nber only)	

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hegeman, Carmen, B., , Date of Receipt Mailing Address 809 La Cruz Drive 2021 City Zip Code State Transaction ID: SA11AI.41874 TX El Paso 79902-1720 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Jean, Jacqueline, , , Date of Receipt Mailing Address 3580 Westwood Drive 2021 City State Zip Code Transaction ID: SA11AI.41875 PA Easton 18045-3030 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 50.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Koon, Edward, , , Date of Receipt Mailing Address 4381 Leonard Street 19 2021 City State Zip Code Transaction ID: SA11AI.41876 MI Coopersville 49404-9610 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) information requested per best efforts information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) 185.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Leblanc, Lydia, , , Date of Receipt Mailing Address P.O. Box 53645 2021 City Zip Code State Transaction ID: SA11AI.41877 LA Lafayette 70505-3645 Amount of Each Receipt this Period FEC ID number of contributing C 9.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) information requested per best efforts information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 81.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. lehner, joseph, , , Date of Receipt Mailing Address 2330 west 60th st 2021 City State Zip Code Transaction ID: SA11AI.41878 IN Indianapolis 46228-1150 Amount of Each Receipt this Period FEC ID number of contributing 2.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) information requested per best efforts information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 18.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Leon, David, , , Date of Receipt Mailing Address 1515 Jamacha Way 2021 City State Zip Code Transaction ID: SA11AI.41879 CA El Cajon 92019-4123 Amount of Each Receipt this Period FEC ID number of contributing C 9.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) information requested per best efforts information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 81.00 Other (specify) 20.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lineberger III, Adrian, , , Date of Receipt Mailing Address 10217 Mahonia St Unit 204 2021 City Zip Code State Transaction ID: SA11AI.41880 NC Charlotte 28277-3912 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) information requested per best efforts information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 180.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McClow, Shelley, , , Date of Receipt Mailing Address 513 S. Lee Street 2021 City State Zip Code Transaction ID: SA11AI.41881 IN Garrett 46738-1578 Amount of Each Receipt this Period FEC ID number of contributing 7.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 56.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Melby, Terry, , , Date of Receipt Mailing Address 1320 7th Avenue North 26 2021 City Zip Code State Transaction ID: SA11AI.41882 MN Moorhead 56560-2123 Amount of Each Receipt this Period FEC ID number of contributing C 5.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) information requested per best efforts information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General 45.00 Other (specify) 32.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC					
Full Name of Individual (Last, First, Middle I Minks, Rachel, , ,  Mailing Address 17024 Barium Street Northw	Date of Receipt				
		T=	09 13 2021		
City Andover	State	Zip Code 55304-1623	Transaction ID : SA11AI.41883		
	IVIIA	35304-1623	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer (for Individual) Capstone Homes		ation (for Individual) or of Community & Culture	Memo Item		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 2300.00			
Full Name of Individual (Last, First, Middle I Morrison, Dorothy, , ,  Mailing Address 99 Morrison Road	Initial) or Full Orga	nization Name	Date of Receipt		
			09 29 2021		
City					
Lillington	NC	27546-8884	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		200.00		
Name of Employer (for Individual) Information requested per best efforts		ation (for Individual) ation requested per best efforts	Memo Item		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 200.00			
Full Name of Individual (Last, First, Middle I C. Mungas, Carol, E., ,	nitial) or Full Orga	nization Name	Date of Receipt		
Mailing Address 2088 N 164th Ave.			09 28 2021		
City Goodyear	State AZ	Zip Code 85395-1811	Transaction ID : SA11AI.41886  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		1000.00		
Name of Employer (for Individual) Retired	Occupa Retired	ation (for Individual)	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (optional)			1450.00		
TOTAL This Period (last page this line number	er only)				

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Reh, Thomas, , , Date of Receipt Mailing Address 9850 Waterbury Drive 2021 City Zip Code State Transaction ID: SA11AI.41887 MO Saint Louis 63124-1046 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Schierloh, Kathryn, , , Date of Receipt Mailing Address 1577 Sierra Vista Way 2021 City State Zip Code Transaction ID: SA11AI.41888 OH Fairborn 45324-7685 Amount of Each Receipt this Period FEC ID number of contributing 9.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information requested per best efforts Information requested per best efforts Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 72.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Snyder, Maryann, , , Date of Receipt Mailing Address 11585 Shelborne Road 30 2021 City State Zip Code Transaction ID: SA11AI.41889 IN Carmel 46032-9528 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 6009.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER:				PAGE	: ′	14	OF	149		
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	Statements may not be sold or used by any personal ename and address of any political committee to					
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC						
Full Name of Individual (Last, First, Middle In	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 14595 W. Rockland Road Ur	nit 328	09 30 2021				
City	State Zip Code IL 60048-9514	Transaction ID : SA11AI.41890  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	FEC ID number of contributing					
Name of Employer (for Individual) Van Thorre & Associates	Occupation (for Individual) Accountant	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00					
Full Name of Individual (Last, First, Middle In Wach, Jeanne, , ,  Mailing Address 459 Mountain View Road	nitial) or Full Organization Name	Date of Receipt				
City Nazareth	State         Zip Code           PA         18064-9657	7 Transaction ID : SA11AI.41892 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00					
Full Name of Individual (Last, First, Middle In Webber, Alan, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address PO Box 208		09 22 2021				
City Bellflower	State         Zip Code           MO         63333-0208	Transaction ID : SA11AI.41893  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	30.00				
Name of Employer (for Individual) Information requested per best efforts	Information requested per best efforts Information requested per best efforts					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  240.00					
SUBTOTAL of Receipts This Page (optional)	····	4030.00				
TOTAL This Period (last page this line number	conly)					

FOR LINE NUMBER: PAGE 15 OF 149 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c Detailed Summary Page 14

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	ny information copied from such Reports and State for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC							
Α.	Full Name of Individual (Last, First, Middle Initial Winchester, Carmen, , ,	anization Name	Date of Receipt					
	Mailing Address 217 Churchill Drive			09 02 2021				
	City Lafayette	State LA	Zip Code 70506-6114	Transaction ID : SA11AI.41894  Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		9.00				
	Name of Employer (for Individual) information requested per best efforts	'	ation (for Individual) ation requested per best efforts	Memo Item				
	Receipt For:  Primary General  Other (specify) ▼							
В.	Full Name of Individual (Last, First, Middle Initial Zedkaia, Roland, , ,  Mailing Address 1778 Sandtown Road Southwest		anization Name	Date of Receipt				
	City	State	Zip Code	09 01 2021  Transaction ID : SA11AL41895				
	Marietta	GA	30060-4354	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		5.00				
	Name of Employer (for Individual) Wellstar Healthcare System	Occupa Health	ation (for Individual) care	Memo Item				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 45.00					
<u> </u>	Full Name of Individual (Last, First, Middle Initia	al) or Full Orga	anization Name	Date of Receipt				
Ο.	Mailing Address			M = M / D = D / Y = Y = Y				
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	Name of Employer (for Individual)	Memo Item						
	Receipt For:  Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼					
S	SUBTOTAL of Receipts This Page (optional)			14.00				
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## 17

SCHEDULE B (FEC Form 3X)					PAGE 16 OF 149					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check or							
		Summary Page	<b>X</b> 21b		23 28c	26 27 29 30b				
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NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)				Data of	Dishurson	aant				
A. Anedot, Inc				Date of	Disbursem					
Mailing Address 1340 Poydras Street				09	01	2021				
Suite 1770										
,	State LA	Zip Code		FEC Id	entification	Number				
New Orleans Purpose of Disbursement	LA	70112								
Credit card processing fee true up				C		D 00010 10055				
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Senate   President	Primary Other (spec	General (cify) ▼								
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Full Name (Last, First, Middle Initial)										
B. Anedot, Inc				Date of	Disbursem					
Mailing Address 1340 Poydras Street Suite 1770						2021				
,	State LA	Zip Code		FEC Id	entification	Number				
New Orleans Purpose of Disbursement	7.1.54.1.5									
Credit Card Processing Fees						Transaction ID : SB21B.41897				
Candidate Name						Disbursement this Period				
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Senate	Primary	General			,	,				
State: District:	Other (spec	cify)		Me	mo Item					
Full Name (Last, First, Middle Initial)				+						
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Mailing Address 2700 Coast Ave				09	02	2021				
City	State	Zip Code		EEC 14	entification	Number				
Mountain View	CA	94043			-nuncation	INUITIDEI				
Purpose of Disbursement Bank Fee				C						
Candidate Name						D: SB21B.41896 Disbursement this Period				
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Mailing Address 21850 Inglewood Ct.  City Ashburn Purpose of Disbursement Mailer Production IE- See Schedule D  Candidate Name  Category/ Type  Office Sought: House Senate President President State: District:  SUBTOTAL of Disbursements This Page (optional)	SCHEDULE B (FEC Form 3X)			FOR LIN	E NUMBER: PAGE 17 OF 149					
Detailed Summary Page   28    28    28    29    30	ITEMIZED DISBURSEMENTS			l `						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in PLAN)										
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  WOMEN SPEAK OUT PAC  Full Name (Last, First, Middle Initial)  A. Namecheap.com  Mailing Address 4600 East Washington Street Suite  City Phoenix Purpose of Disbursement Website House Primary State Primary Office Sought State Corporate Commission  Mailing Address  City Purpose of Disbursement Accounting Fee Candidate Name  City State Corporate Commission  Mailing Address  City Purpose of Disbursement Accounting Fee Candidate Name  City State District  Full Name (Last, First, Middle Initial)  State Corporate Commission  Mailing Address  City State Senate Primary Office Sought House Purpose of Disbursement State: District  Full Name (Last, First, Middle Initial)  City State Category/ Type  Office Sought House Primary Other (specify)  Other (specify)  FEC Identification Number  Category/ Type  Transaction ID: S8218.42251 Amount of Each Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  Date of Disbursement  FEC Identification Number  FEC Identification Number  Category/ Type  Transaction ID: S8218.42244 Amount of Each Disbursement  FEC Identification Number  Category/ Type  Transaction ID: S8218.42244 Amount of Each Disbursement Inic Period  Transaction ID: S8218.42244 Amount of Each Disbursement Inic Period  Transaction ID: S8218.42244 Amount of Each Disbursement Inic Period  Transaction ID: S8218.42244 Amount of Each Disbursement Inic Period  Transaction ID: S8218.42244 Amount of Each Disbursement Inic Period  Transaction ID: S8218.4234 Amount of Each Disbursement Inic Period  Transaction ID: S8218.4234 Amount of Each Disbursement Inic Period  Transaction ID: S8218.4234 Amount of Each Disbursement Inic Period  Transaction ID: S8218.4234 Amount of Each Disbursement Inic Period  Transaction ID: S8218.4234 Amount of Each Disbursement Inic Period  Transaction ID: S8218.4234 Amount of Each Disbursement Inic Period  Transact	Any information conicd from such Deposits and Olek									
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Full Name (Last, First, Middle Initial)  A Namecheap.com  Mailing Address 4600 East Washington Street Suite  City State Zip Code Phoenix Purpose of Disbursement Website Hosting  Candidate Name  Candidate Name  City Senate Primary General Purpose of Disbursement Period Office Sought: House Senate Primary General Purpose of Disbursement Accounting Fee  Candidate Name  City State: District: Transaction ID: S8218-42250  Amount of Each Disbursement his Period State: District: Transaction ID: S8218-42251  Accounting Fee  Candidate Name  City State: District: Transaction ID: S8218-42251  Accounting Fee  Candidate Name  Coffice Sought: House Disbursement For: Senate President Disbursement For: Senate President District: Transaction ID: S8218-42251  City State: District: Transaction ID: S8218-42251  Accounting Fee  Candidate Name  Coffice Sought: House Disbursement For: Senate President District: Transaction ID: S8218-42251  City Ashburn  Mailing Address 21850 Inglewcod Ct.  City Ashburn  Mailing Address 21850 Inglewcod Ct.  City Ashburn  Mailing Address 21850 Inglewcod Ct.  City Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate President District: Transaction ID: S8218-4224: Amount of Each Disbursement ins Period Type  Office Sought: House Disbursement For: Senate President District: Transaction ID: S8218-424: Amount of Each Disbursement ins Period Type  Office Sought: House Disbursement For: Senate President District: Transaction ID: S8218-4224: Amount of Each Disbursement ins Period Type  Office Sought: House Disbursement For: Senate President District District: Transaction ID: S8218-4224: Amount of Each Disbursement ins Period Type  Office Sought: Senate President District Distr	NAME OF COMMITTEE (In Full)									
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Mailing Address 4600 East Washington Street Suite	· · · · · · · · · · · · · · · · · · ·				Data	f Distance -				
City		M = M	/ D	D / Y Y Y Y Y						
Phoenix Purpose of Disbursement Website Hosting Cardidate Name  Category/ Type  Office Sought: House Primary General Disbursement For: Senate President Other (specify) ▼  State: Disfirct: State: Disbursement For: General Other (specify) ▼  State Corporate Commission  Malling Address  City State Zip Code  Purpose of Disbursement Accounting Fee Candidate Name  Office Sought: House Disbursement For: General Other (specify) Type  Office Sought: House Disbursement For: Senate President District: District: District: District: Pull Name (Last, First, Middle Initial)  C. Tradewinds Consulting, Inc.  Malling Address 21850 Inglewood Ct.  City State Zip Code President Disbursement Tipe Primary General Disbursement Tipe Primary Disbursement Tipe Disbursement Tipe Primary Disbursement Tipe Disbursement Tipe Primary Disbursement Tipe Disbursement Tipe Primary Disbursement Tipe	Mailing Address 4600 East Washington Street Sui	te			09	Ū	2021			
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4 4004 47	State: District:									
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TOTAL This Period (last page this line number only)							<b>– 14921.47</b>			

## SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.9700 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2800 Shirlington Rd Other (specify) ▼ Ste 1200 City State ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 77452.55 77452.55 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2017 11/30/2021 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 77452.55 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

## SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 19 OF 149

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.13439 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2800 Shirlington Rd Other (specify) ▼ Ste 1200 State City ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10118.58 10118.58 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2018 11/30/2022 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 10118.58 TOTALS This Period (last page in this line only)..... 87571.13 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

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149

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Denton US LLP Mailing Address 1900 K Street NW State Zip Code Washington DC 20006 Transaction ID: SD10.39259 Outstanding Balance Beginning This Period 33139.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 33139.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Estimate digital ads Media Bridge Mailing Address 11300 Astarita Ave City State Zip Code Partlow 22534 Outstanding Balance Beginning This Period Transaction ID: SD10.15740 2000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4157 10500.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 10500.00 45639.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 21 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

149

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Loan for FEC Reporting Services Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.4110 Outstanding Balance Beginning This Period 5000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings Expense Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.4318 5204.43 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5204.43 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original transactions put on SBA CC Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.6625 8610.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 8610.00 18814.43 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 22 FOR LINE NUMBER: (check only one)

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149

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Expense put on SBA CC Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 State Zip Code Arlington VΑ 22206 Transaction ID: SD10.6756 Outstanding Balance Beginning This Period 4709.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4709.73 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): To post Thrifty Car Rental Expense put on Susan B Anthony List, Inc. SBA Card Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.9222 1894.83 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1894.83 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Supplies Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.15960 200.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 200.00 6804.56 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ......

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 23 OF 149 FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC

A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.	Non-Federal - Travel		
Mailing Address 2800 Shirlington Rd Ste 1200			
City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period			Transaction ID : SD10.15958
27.90			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	27.90
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Susan B Anthony List, Inc.			Salary / Contractor Pay
Mailing Address 2800 Shirlington Rd Ste 1200			
City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period			Transaction ID : SD10.39334
4324.16			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	4324.16
C. Full Name (Last, First, Middle Initial) of Debtor Susan B Anthony List, Inc.	or Creditor		Nature of Debt (Purpose): Legal Fees
Mailing Address 2800 Shirlington Rd Ste 1200			
City	State	Zip Code	
Arlington	VA	22206	
Outstanding Balance Beginning This Period 4950.00			Transaction ID : SD10.41208
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period
0.00		0.00	4950.00
7 7 7	7	7 7	
SUBTOTALS This Period This Page (optional)		)	9302.06
TOTALS This Period (last page this line number	only)	)	
TOTAL OUTSTANDING LOANS from Schedule C	C (last page o	nly)	
ADD 2) and 3) and carry forward to appropriate I	ine of Summa	ary Page (last page only)	
			, , , , , , , , , , , , , , , , , , , ,

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 24 OF
FOR LINE NUMBER:
(check only one)

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X	10

149

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailer Production- Tradewinds See Schedule Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 State Zip Code Arlington VA 22206 Transaction ID: SD10.41901 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15000.00 15000.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period 15000.00 1) SUBTOTALS This Period This Page (optional)..... 95560.05 2) TOTALS This Period (last page this line number only)..... 87571.13 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ......

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 25 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			An	09 20 2021 nount
City	State	Zip Code	— Г	117.25
Arlington	VA	22206		ansaction ID : SE.42158 te of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ught: X House District: 32
ALLRED, COLIN, , ,		<b>✗</b> Oppose		esident Senate State: TX
Calendar Year-To-Date			Disburser	
Per Election for Office Sought	7-1-1-7-	302.48	2022	Other (specify) ▶
Full Name of Payee The Lukens Company		☐ Memo	Item Da	tte of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			An	nount
City	State	Zip Code	— Г	117.25
Arlington	VA	22206		ransaction ID : SE.42159 te of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office So	ught:  House District: 03
AXNE, CINDY, , ,		<b>x</b> Oppose	Pre	esident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	<b></b>	302.48	Disburser 2022	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures				234.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1	M = M	/ D D / Y Y Y Y Y
Signature	Гиницу I и	Date	9 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 26 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u>'</u>
WOMEN SPEAK OUT PAC				C C00530766
Check if 24 hour report 40 hour report	Now rope	ort Amondo rono	ort filad a	M M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	on med c	
Full Name of Payee The Lukens Company		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd				09 20 2021 Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42160 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 2021
Name of Federal Candidate:		Support	Office	Sought: House District:
AYOTTE, KELLY A, , ,		Oppose		President X Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	7 7	672.94	Disbur 2022	sement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				Amount
0.11	10: 1	7. 0.1		
City Arlington	State VA	Zip Code 22206		Transaction ID : SE.42161 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought:  Mouse District: 02
BACON, DONALD J, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	<i></i>	302.48	Disbur 2022	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures			. •	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(1, 000000000000000000000000000000000000				7
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 -	M	M / D D / Y Y Y Y Y Y
Signature	omoung I'll	Date	9 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES					PAGE 27	
NAME OF COMMITTEE (In Full)						24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC ID	ENTIFICAT	ION NUMBER ▼
77671277 2711 3371713				C	C00530766	5
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	= M /	D D /	Y
Full Name of Payee The Lukens Company		☐ Memo		of Public	Distribution	/Dissemination
Mailing Address 2800 Shirlington Rd			L	09	20	2021
2000 Shillington Nu			Amou	nt		
City	State	Zip Code				234.50
Arlington	VA	22206			D: SE.4216 sement or	
Purpose of Expenditure Printing		Category/ Type		09 /	30	2021
Name of Federal Candidate:		Support	Office Sough	nt·	House	District:00
BENNET, MICHAEL F., , ,		Capport Oppose	Presid		Senate	State: CO
Calendar Year-To-Date			Disbursemer		Primar	
Per Election for Office Sought	<b>7</b>	790.19	2022	Other (spe		,
Full Name of Payee		☐ Memo	Item Date	of Public	Distribution	/Dissemination
The Lukens Company			Г	09 /	20	2021
Mailing Address 2800 Shirlington Rd			Amou			
City	State	Zip Code				117.25
Arlington	VA	22206			D : SE.4216	
Purpose of Expenditure	VA	22206	Date	of Disbur	sement or	
Mailer Production		Category/ Type		09	30	2021
Name of Federal Candidate:		<b>x</b> Support	Office Sough	nt: 🗶	House	District:05
BICE, STEPHANIE, , ,		Oppose	Presid	ent	Senate	State: OK
Calendar Year-To-Date		202.49	Disbursemer	nt For:	Primar	y <b>X</b> General
Per Election for Office Sought	7-1-5-	302.48	<sup>2022</sup>	Other (spe	ecify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures			· • [			351.75
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •			
(c) TOTAL Independent Expenditures						
(c) 10 M2 maoponaoni Exponentiaco			•	7		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized					
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TEMIZED INDEPENDENT EXPENDITURES				PAGE 28 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd				09 20 2021
			Amo	unt
City	State	Zip Code		117.25
Arlington	VA	22206		saction ID : SE.42164 of Disbursement or Obligation
Purpose of Expenditure Printing	'	Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office Soug	ght: House District:
BIDEN, JOSEPH R JR, , ,		X Oppose	resid	
Only des Vers To Date			Disburseme	
Calendar Year-To-Date Per Election for Office Sought	7	302.48	2022	Other (specify)
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
The Lukens Company				M M M / D D / Y M Y M Y
Mailing Address			<u> </u>	09 20 2021
2800 Shirlington Rd			Amo	unt
City	State	Zip Code	$ \Gamma$	117.25
Arlington	VA	22206	Trar	nsaction ID : SE.42165
Purpose of Expenditure		Cotogony	Date	of Disbursement or Obligation
Printing		Category/ Type	<b></b>	09 7 30 7 2021
Name of Federal Candidate:		<b>x</b> Support	Office Soug	ght: X House District: 03
BOEBERT, LAUREN, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	1 1	302.48	Disburseme	ent For: Primary <b>X</b> General Other (specify) ▶
				Other (specify) =
(a) SUBTOTAL of Itemized Independent Expenditures	i		•	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· [	
(c) TOTAL Independent Expenditures			· [	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically File	led] Date	M M /	20 2021

TEMIZED INDEPENDENT EXPENDITORES				PAGE 29 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
The Lukens Company				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			A	Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Fransaction ID : SE.42166 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	Sought: House District: 07
BOURDEAUX, CAROLYN, , ,		X Oppose	P	resident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	302.48	Disburs 2022	ement For:  Primary  General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item [	Date of Public Distribution/Dissemination
The Lukens Company				09 / D D / Y Y Y Y Y Y 2021
Mailing Address 2800 Shirlington Rd				Amount
			′	
City Arlington	State	Zip Code		117.25 Transaction ID: SE.42167
Purpose of Expenditure	VA	22206		Date of Disbursement or Obligation
Printing Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office S	Sought: House District: 00
BURR, RICHARD M, , ,		Oppose	P	resident Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	, , ,	487.72	Disburs 2022	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures				234.50
			-	
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed1 -	M = M	/ DID / YIYIY
Signature	I would it in	Date	9 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 30 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	itom	of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			L	09 20 2021
			Amou	ınt
City	State	Zip Code		117.25
Arlington	VA	22206		saction ID : SE.42168 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 17
BUSTOS, CHERI, , ,		X Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.48	Disburseme	
Full Name of Payee The Lukens Company		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Amou	
City	State	Zip Code		117.25
Arlington	VA	22206	Tran	nsaction ID : SE.42169 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: X House District: 31
CARTER, JOHN R. REP., , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7	302.48	Disburseme	nt For: Primary   General  Other (specify) ▶
				Suite (speed.)).
(a) SUBTOTAL of Itemized Independent Expenditures	;		•	234.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically File	led] Date	M = M /	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 31 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
TOTAL CONTINUE OF LARK GOT LARGE				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Am	09 20 2021 ount
				<del> </del>
City	State	Zip Code		117.25
Arlington	VA	22206		Insaction ID : SE.42170 e of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office Sou	ught: X House District: 08
CARTWRIGHT, MATTHEW A., , ,		Oppose		sident Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	302.48	Disbursen 2022	nent For:  Primary
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
The Lukens Company				09 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Δ ===	
			Am	ount
City	State	Zip Code		117.25
Arlington	VA	22206	I	ansaction ID : SE.42171 e of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 09 / 2021
Name of Federal Candidate:		Support	Office Sou	ught: K House District: 06
CASTEN, SEAN, , ,		<b>x</b> Oppose	Pres	sident Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.48	Disbursem 2022	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES			PAGE 32 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D / Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo It	M - M / D - D / Y - Y - Y
Mailing Address 2800 Shirlington Rd			09 20 2021 Amount
City	State	Zip Code	234.50
Arlington	VA	22206	Transaction ID : SE.42172 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
CORTEZ MASTO, CATHERINE, , ,		<b>x</b> Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7		Disbursement For: ☐ Primary
Full Name of Payee The Lukens Company		☐ Memo It	Date of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42173  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:  House District: 02
CRAIG, ANGELA DAWN, , ,		<b>x</b> Oppose	President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	7	202.40	Disbursement For:  Primary  General   2022  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			351.75
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	• • • • • • • • • • • • • • • • • • • •
Gross, Jennifer, , ,	Electronically Fil	[ed] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURE	.S				49
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM	
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBE	R▼
				C C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n	Y
Full Name of Payee The Lukens Company		☐ Memo	Item [	Date of Public Distribution/Dissemination	
Mailing Address 2800 Shirlington Rd			,	09 20 2021 Amount	-
City	State	Zip Code		117.25	5
Arlington	VA	22206		Transaction ID : SE.42174 Date of Disbursement or Obligation	
Purpose of Expenditure Printing		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	T Y
Name of Federal Candidate:		Support	Office :	Sought: X House District: 1	13
CRIST, CHARLIE JOSEPH, , ,		Cupport Oppose			-L
		-11		sement For: Primary X Ger	corol
Calendar Year-To-Date Per Election for Office Sought		302.48	2022	Other (specify)	lerai
Full Name of Payee The Lukens Company		☐ Memo	Item [	Date of Public Distribution/Dissemination	on
· ·				09 / 20 / 2021	Y
Mailing Address 2800 Shirlington Rd			,	Amount	
City	State	Zip Code	$\overline{}$	117.25	5
Arlington	VA	22206		Transaction ID : SE.42175 Date of Disbursement or Obligation	
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021	Y
Name of Federal Candidate:		Support	Office :	Sought: K House District:	03
DAVIDS, SHARICE, , ,		Oppose	F		KS
Calendar Year-To-Date Per Election for Office Sought		302.48	Disburs		neral
TOT LIBORION FOR CHIEF CONTROL	7 7			Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditure	es		• [	234.50	
(b) SUBTOTAL of Unitemized Independent Expendi	itures				
(c) TOTAL Independent Expenditures			• • [		
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candiparty committee) any political party committee or i	lidate or authorized				
Gross, Jennifer, , ,	[Electronically Fil	<i>led]</i> Date	e 11	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signaturo		_	· — —		

TEMIZED INDEPENDENT EXPENDITURES			PAGE 34 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D / Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo Ite	M M / D D / Y Y Y Y
Mailing Address 2800 Shirlington Rd			09 20 2021 Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42176 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support (	Office Sought: X House District: 04
DEFAZIO, PETER A, , ,		Oppose	President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	<b>7</b> 1 1 <b>7</b>		Disbursement For: Primary   ☐ General  O22   ☐ Other (specify)   ☐
Full Name of Payee The Lukens Company		☐ Memo Ite	M M / D D / Y Y Y Y
Mailing Address			09 20 2021
2800 Shirlington Rd			Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42177  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 / 30 / 2021
Name of Federal Candidate:		Support (	Office Sought:   House District: 19
DELGADO, ANTONIO, , ,		<b>x</b> Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	200.40	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures			234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	·
Gross, Jennifer, , ,	Electronically Fil	ed] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 35 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	n M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item [	Date of Public Distribution/Dissemination
Mailing Address				09 / 20 / Y Y Y Y Y
2800 Shirlington Rd			,	Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42178 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office S	Sought:  House District: 07
FISCHBACH, MICHELLE, , ,		Oppose		President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	<i>A</i>     <i>A</i>	302.48	Disburs	cement For: Primary General
E-II Nove of Prove			.   .	Other (specify)
Full Name of Payee The Lukens Company		∐ Memo	Item   I	Date of Public Distribution/Dissemination  09  09  09  09  09
Mailing Address 2800 Shirlington Rd				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42179 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office \$	Sought:  House District: 07
FLETCHER, ELIZABETH, , ,		X Oppose	F	President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.48	Disburs 2022	ement For:
•			-	
(a) SUBTOTAL of Itemized Independent Expenditures			• •	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
			, ,	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	'ed1 -	MIN	/
Signature		Date	e 11	20 2021

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 36 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item D	ate of Public Distribution/Dissemination
The Lukens Company				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			A	mount
City	State	Zip Code		117.25
Arlington	VA	22206		ransaction ID : SE.42180 ate of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: X House District:03
GARAMENDI, JOHN, , ,		<b>x</b> Oppose		resident Senate State: CA
Calendar Year-To-Date			Disburse	ement For: Primary X General
Per Election for Office Sought	7	302.48	2022	Other (specify)
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
The Lukens Company				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				
			A	mount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42181 ate of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office S	ought:  House District: 02
GARBARINO, ANDREW, , ,		Oppose	Pr	resident Senate State: NY
Calendar Year-To-Date		202.49		ement For: Primary X General
Per Election for Office Sought	7 7	302.48	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				234.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • L	
(c) TOTAL Independent Expenditures				
( <b>0</b> , 1 <b>0</b> 11 <b>2</b> 11 <b>3</b> 10 <b>3</b> 11 3 11 3				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1	M = M	/ D D / Y Y Y Y Y
Signature	ъссионисину Ги	Date Date	e 11	20 2021

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 37 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item C	Date of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Α	09 20 2021 Imount
City	State	Zip Code	— I	117.25
Arlington	VA	22206		Transaction ID : SE.42182 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office S	Sought:   House District: 25
GARCIA, MICHAEL, , ,		Oppose	P	resident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7	302.48	Disburse 2022	ement For: Primary   General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
The Lukens Company				09 20 / Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			А	mount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42183 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office S	Sought: K House District: 26
GIMENEZ, CARLOS, , ,		Oppose	Pi	resident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	302.48	Disburse 2022	ement For: Primary   General  Other (specify) ▶
•				
(a) SUBTOTAL of Itemized Independent Expenditures			• •	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			• [	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	'ed1 -	M = M	/ D D / Y Y Y Y Y
Signature		Date	e 11	20 2021

TEMPLES INSERTIONES				FOR LINE 24 OF FORM 2V
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOMEN OF EARL OOF FAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo	Item	Date of Public Distribution/Dissemination
Marillan Address				09 / 20 / Y 2021
2800 Shirlington Rd				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42185 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought:  M House District: 02
GOLDEN, JARED, , ,		X Oppose		President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		302.48	Disbu 2022	rsement For: Primary   General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				Amount
		T		
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID: SE.42186  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	e Sought:  Mouse District: 23
GONZALES, ERNEST ANTHONY TONY, , , II		Oppose		President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		302.48	Disbu 2022	rrsement For: Primary Seneral
rei Liection for Office Sought	7 7			Other (specify) ▶
(a) CURTOTAL of Housingd Indonesia and Fune additions				224.52
(a) SUBTOTAL of Itemized Independent Expenditures				234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(2) TOTAL Independent Europhituses				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically File	'edl Date	e 1	1 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e l	20 2021

PAGE 39 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee The Lukens Company 20 2021 Mailing Address 2800 Shirlington Rd Amount City State Zip Code 117.25 Arlington VA 22206 Transaction ID: SE.42187 Date of Disbursement or Obligation Purpose of Expenditure Category/ Printing 09 30 2021 Type Name of Federal Candidate: 15 Support Office Sought: **X** House District: GONZALEZ, VICENTE, , , Oppose TX President State: Senate Primary Disbursement For: **X** General Calendar Year-To-Date 302.48 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item The Lukens Company 2021 20 09 Mailing Address 2800 Shirlington Rd Amount 117.25 City State Zip Code Arlington Transaction ID: SE.42188 VA 22206 Date of Disbursement or Obligation Purpose of Expenditure Category/ Printing 30 2021 09 Type Name of Federal Candidate: x Support 05 Office Sought: **X** House District: GOOD, ROBERT G., , , VA Oppose President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 302.48 2022 Per Election for Office Sought Other (specify) ▶ 234.50 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date Signature

TEMIZED INDEFENDENT EXPENDITORES	•		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M M / D D / Y Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 2800 Shirlington Rd			09 20 2021 Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42189 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 30 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:   House District: 05
GOTTHEIMER, JOSH, , ,		<b>✗</b> Oppose	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.48	Disbursement For:  Primary  General 2022  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
The Lukens Company			09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amount
City	State	Zip Code	351.75
Arlington	VA	22206	Transaction ID : SE.42190  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 / 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought: House District: 00
GRASSLEY, CHARLES E, , ,		Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	907.44	Disbursement For:  Primary  General 2022  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		. • 469.00
(b) SUBTOTAL of Unitemized Independent Expendit	ures		. •
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized	•	•
Gross, Jennifer, , ,	[Electronically File	ed] Date	e 11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature			

TEMIZED INDEPENDENT EXPENDITURES				PAGE 41 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo	Item I	Date of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd				09 20 2021 Amount
City	State	Zip Code		234.50
Arlington	VA	22206		Transaction ID : SE.42191 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / 2021
Name of Federal Candidate:		Support	Office \$	Sought: House District: 00
HASSAN, MARGARET WOOD, , ,		<b>x</b> Oppose		President X Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		907.44	Disburs	sement For: Primary General
Tel Election for Office Sought	7 7			Other (specify) ▶
Full Name of Payee The Lukens Company		☐ Memo	Item I	Date of Public Distribution/Dissemination  09  09  09  09  09
Mailing Address 2800 Shirlington Rd			,	Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42192 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought: House District: 02
HERRELL, STELLA YVETTE, , ,		Oppose	F	President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	302.48	Disburs 2022	sement For: Primary <b>X</b> General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			[	351.75
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	'ed1 -	M = N	M / D D / Y Y Y Y Y
Signature		Date	11	20 2021

TEMIZED INDEPENDENT EXPENDITORES				PAGE 42 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Lukens Company				09 / D D / Y Y Y Y Y Y 2021
Mailing Address 2800 Shirlington Rd			Amo	ount
City	State	Zip Code	-	117.25
Arlington	VA	22206		nsaction ID : SE.42193 e of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Sou	ght: 🗶 House District:01
ARENHOLZ, ASHLEY HINSON, , ,		Oppose	Pres	ident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7	302.48	Disbursem 2022	ent For: ☐ Primary ✗ General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Lukens Company				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amo	ount
City	State	Zip Code	— г	117.25
Arlington	VA	22206		Insaction ID : SE.42194 e of Disbursement or Obligation
Purpose of Expenditure	1	Category/	Dati	M M / D D / Y Y Y Y
Printing		Туре	_   _	09 30 2021
Name of Federal Candidate:		Support	Office Sou	ght:   House District:   04
HORSFORD, STEVEN ALEXZANDER, , ,		<b>x</b> Oppose	Pres	ident Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		302.48	Disbursem 2022	
, <u> </u>	1			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			. $\Box$	234.50
(a) GOD TO TAL OF REMIZED INDEPENDENT EXPENDITURES				204.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed1 -	M = M	/ D D / Y Y Y Y Y Y Y 2021
Signature		Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 43 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amo	punt
City	State	Zip Code	-	117.25
Arlington	VA	22206		nsaction ID : SE.42195 e of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Sou	ght: X House District: 08
HUDSON, RICHARD L. JR., , ,		Oppose	Pres	ident Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.48	Disburseme 2022	ent For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		Memo	1_	e of Public Distribution/Dissemination
The Lukens Company				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Ama	
			Amo	
City Arlington	State	Zip Code 22206	I	351.75 nsaction ID : SE.42196
Purpose of Expenditure Printing	I	Category/ Type	Date	e of Disbursement or Obligation  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Sou	ght: House District:00
JOHNSON, RON HAROLD MR., , ,		Oppose	Pres	ident Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	7 7	907.44	Disburseme 2022	ent For: Primary <b>X</b> General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [	469.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led]	M = M	20 2021
Signature		Date	9 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 44 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd				09 20 2021 Amount
City	State	Zip Code		586.25
Arlington	VA	22206	I	Transaction ID : SE.42197 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 7 2021
Name of Federal Candidate:		Support	Office	Sought: House District: 00
KELLY, MARK, , ,		<b>x</b> Oppose		President X Senate State: AZ
Calendar Year-To-Date			$\vdash$	sement For: Primary 🗶 General
Per Election for Office Sought	7	2068.10	2022	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company		weme	nom -	M M / D D / Y Y Y Y
Mailing Address 2800 Shirlington Rd				09 20 2021
			'	Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42198 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought:
KIM, YOUNG, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		302.48	Disburs	sement For: Primary 🗶 General
Per Election for Office Sought	7 - 1 - 7 -		2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• [	703.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			• [	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led]	M = 1	M / D D / Y Y Y Y Y
Signature	ъссыониану F II	Eaj Date	e 11	20 2021

PAGE 45 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee The Lukens Company 20 2021 Mailing Address 2800 Shirlington Rd Amount City State Zip Code 117.25 Arlington VA 22206 Transaction ID: SE.42199 Date of Disbursement or Obligation Purpose of Expenditure Category/ Printing 09 30 2021 Type Name of Federal Candidate: 03 Support Office Sought: **X** House District: KIND, RONALD JAMES, , , WI Oppose President State: Senate Primary Disbursement For: **X** General Calendar Year-To-Date 302.48 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item The Lukens Company 2021 20 09 Mailing Address 2800 Shirlington Rd Amount 117.25 City State Zip Code Arlington Transaction ID: SE.42200 VA 22206 Date of Disbursement or Obligation Purpose of Expenditure Category/ Printing 30 2021 09 Type Name of Federal Candidate: 17 Support Office Sought: **X** House District: LAMB, CONOR, , , PΑ X Oppose President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 302.48 2022 Per Election for Office Sought Other (specify) ▶ 234.50 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 46 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address				09 20 7 2021
2800 Shirlington Rd			Am	nount
City	State	Zip Code		117.25
Arlington	VA	22206	I .	ansaction ID : SE.42201 te of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 7 2021
Name of Federal Candidate:		Support	Office So	ught: House District: 00
LAXALT, ADAM, , ,		X Oppose	l	esident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7 7	907.44	Disburser 2022	ment For:  Primary <b>X</b> General Other (specify) ▶
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y
Mailing Address 2000 Shirlington Dd				09 20 2021
2800 Shirlington Rd			An	nount
City	State	Zip Code		117.25
Arlington	VA	22206	I .	ransaction ID : SE.42202 ite of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office So	ught: X House District: 03
LEE, SUSIE, , ,		X Oppose	Pre	esident Senate State: NV
Calendar Year-To-Date		302.48	Disburser	ment For: Primary (X) General
Per Election for Office Sought	7 7	002.10	2022	Other (specify) ►
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	234.50
(b) SUBTOTAL of Unitemized Independent Expenditur	70°			
(a) 30210112 of officering a mappen active Experiation				
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M = M	/ D D / Y Y Y Y Y
Signature		Date	11	20 2021

Signature

### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 47 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOMEN OF LAR OUT TAO				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Amo	09 20 2021
			74110	
City	State	Zip Code		117.25
Arlington	VA	22206		saction ID : SE.42203 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	aht: X House District: 49
LEVIN, MIKE, , ,		X Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	302.48	Disburseme	ent For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
Mailing Address 2800 Shirlington Rd			Amo	unt
	T -	T =		
City	State	Zip Code		117.25
Arlington	VA	22206	I	nsaction ID : SE.42204 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 02
LURIA, ELAINE, , ,		Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought	7	302.48	Disburseme	ent For:
•				
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		· [	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M - M /	20 2021

TEMIZED INDEPENDENT EXPENDITORES				PAGE 48 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			An	nount
City	State	Zip Code		117.25
Arlington	VA	22206		ansaction ID : SE.42205 ate of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sc	ought: X House District: 01
MACE, NANCY, , ,		Oppose	Pre	esident Senate State: SC
Calendar Year-To-Date Per Election for Office Sought	, , ,	302.48	Disburser 2022	ment For:
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Λ	
				nount
City	State	Zip Code		117.25 ransaction ID : SE.42206
Arlington	VA	22206		ate of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office Sc	ought:   House District: 07
MALINOWSKI, TOM, , ,		<b>x</b> Oppose	Pre	esident Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	, , ,	302.48	Disburser 2022	ment For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures				234.50
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M = M	/ D D / Y Y Y Y Y
Signature	и опишну 1 ll	Date	e 11	20 2021

PAGE 49 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee The Lukens Company 20 2021 Mailing Address 2800 Shirlington Rd Amount City State Zip Code 117.25 Arlington VA 22206 Transaction ID: SE.42207 Date of Disbursement or Obligation Purpose of Expenditure Category/ Printing 09 30 2021 Type Name of Federal Candidate: 11 **X** Support Office Sought: **X** House District: MALLIOTAKIS, NICOLE, , , NY Oppose President State: Senate Disbursement For: Primary **X** General Calendar Year-To-Date 302.48 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item The Lukens Company 2021 20 09 Mailing Address 2800 Shirlington Rd Amount 234.50 City State Zip Code Arlington Transaction ID: SE.42208 VA 22206 Date of Disbursement or Obligation Purpose of Expenditure Category/ Printing 30 2021 09 Type Name of Federal Candidate: 00 x Support Office Sought: House District: MANCHIN III, JOE, , , WV Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 604.96 2022 Per Election for Office Sought Other (specify) ▶ 351.75 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 50 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M " M / D " D / Y " Y " Y " Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amo	unt
City	State	Zip Code		117.25
Arlington	VA	22206		saction ID : SE.42209 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: House District: 00
MCSALLY, MARTHA, , ,		Oppose	Presi	^-
Calendar Year-To-Date Per Election for Office Sought	7 7	2185.35	Disburseme	ent For: Primary <b>X</b> General Other (specify) ▶
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
The Lukens Company		_		M M / D D / Y Y Y Y
Mailing Address			I	09 20 2021
2800 Shirlington Rd			Amo	unt
City	State	Zip Code		117.25
Arlington	VA	22206	<b>I</b>	nsaction ID : SE.42210 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		M M O9 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: X House District: 02
MILLER-MEEKS, MARIANNETTE JANE, , ,		Oppose	Presi	dent Senate State: IA
Calendar Year-To-Date		302.48	Disburseme	ent For: Primary 🗶 General
Per Election for Office Sought	7-1-1-7-	302.46	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [	234.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>&gt;</b>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed]	M M /	20 2021
Signature	<u> </u>	_ Date	, ,,,	2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 51 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u>'</u>
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42211 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / 2021
Name of Federal Candidate:		Support	Office	Sought:
MURPHY, STEPHANIE, , ,		x Oppose		President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		302.48	Disbur 2022	sement For: Primary
,	, ,		.	Other (specify)
Full Name of Payee The Lukens Company		∐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				09 20 2021
2800 Shirlington Rd				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42212 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		M 09 / 30 / Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought:  House District: 22
NEHLS, TROY, , ,		Oppose		President Senate State: TX
Calendar Year-To-Date		302.48	1	sement For: Primary 🗶 General
Per Election for Office Sought	7 7	302.40	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	ree			
(b) GOD TO TAL OF OTHER MIZE OF THE PROPERTY EXPENDITION				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1	M	M / D D / Y Y Y Y Y
Signature	The first t	Date	e 11	20 2021

Signature

#### SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 52 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date o	f Public Distribution/Dissemination
The Lukens Company				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amoun	t
City	State	Zip Code		117.25
Arlington	VA	22206	Transa	action ID : SE.42213
Purpose of Expenditure				f Disbursement or Obligation
Printing		Category/ Type		09 30 7 2021
Name of Federal Candidate:		Support	Office Sought	:: X House District: 01
O'HALLERAN, TOM, , ,		<b>x</b> Oppose	Preside	Δ7
Calendar Year-To-Date			Disbursement	
Per Election for Office Sought	7	302.48	2022 O	her (specify) ▶
Full Name of Payee The Lukens Company		☐ Memo	Item Date o	f Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd				09 20 2021
2000 Chillington No			Amoun	t
City	State	Zip Code	- I :	117.25
Arlington	VA	22206	Trans	action ID : SE.42214  f Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	М	09 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought	: X House District: 04
OWENS, BURGESS, , ,		Oppose	Preside	
Calendar Year-To-Date		1 1 1 1 1 1	Disbursement	For: Primary Seneral
Per Election for Office Sought	7	302.48	2022 Ot	her (specify)
(a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditur  (c) TOTAL Independent Expenditures	es		•	234.50
(5) TO TAL INDOPOSIDENT EXPONENTIALS			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , , [	Electronically Fil	[ed]	M = M /	20 / 2021
Signatura		_ Date	9 11	2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 53 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item Date	te of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Am	09 20 2021 Jount
City	State	Zip Code	— г	117.25
Arlington	VA	22206		ansaction ID : SE.42215 te of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soi	ught: X House District: 01
PAPPAS, CHRIS, , ,		× Oppose	Pres	sident Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.48	Disbursen 2022	nent For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
The Lukens Company				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Am	ount
City	State	Zip Code	—г	234.50
Arlington	VA	22206		ansaction ID : SE.42216 te of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sor	ught:   House District: 12
PELOSI, NANCY, , ,		x Oppose	Pres	sident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	T	604.96	Disbursen 2022	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures			г	351.75
(a) 000 10 112 0 110 1120 1120 por 120 11 2.,por 121 121				7 7
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • _	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 –	M = M	/ D D / Y Y Y Y Y
Signature		Date	e 11	20 2021

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				09 20 / 9 201
Mailing Address 2800 Shirlington Rd				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID: SE.42218 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 4 2021
Name of Federal Candidate:		<b>X</b> Support	Office	Sought: X House District: 10
PERRY, SCOTT, , ,		Oppose		President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	, , ,	302.48	Disbu 2022	rsement For:
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y
Mailing Address				09 20 2021
2800 Shirlington Rd				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42219 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Турс		
Name of Federal Candidate:		Support	Office	Sought: House District: 45
PORTER, KATHERINE, , ,		<b>x</b> Oppose		President Senate State: CA
Calendar Year-To-Date		302.48	1	rsement For: Primary
Per Election for Office Sought	7 7	11111	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			▶	234.50
(b) SUBTOTAL of Unitemized Independent Expenditur	es		▶	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Expenditures			▶	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M =	1 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 1	20 2021

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				09 20 7 2021
Mailing Address 2800 Shirlington Rd				Amount
City	State	Zip Code		234.50
City Arlington	VA	22206		Transaction ID : SE.42220
	VA	22200		Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office	Sought: House District: 00
PORTMAN, ROB THE HONORA, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 7	604.96	Disbu 2022	rsement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				09 20 2021
2000 Shirilington Ku				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42221 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought: K House District: 21
ROY, CHIP, , ,		Oppose		President Senate State: TX
Calendar Year-To-Date		202.40	1	rsement For: Primary X General
Per Election for Office Sought	7	302.48	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	351.75
(b) SUBTOTAL of Unitemized Independent Expenditure	es		▶	
(c) TOTAL Independent Expenditures			▶	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 1	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 56 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Di	ate of Public Distribution/Dissemination
The Lukens Company		_ Welle	item 5	M M / D D / Y Y Y Y Y O D D / 2021
Mailing Address 2800 Shirlington Rd			Ar	mount
City	State	Zip Code		351.75
Arlington	VA	22206		ransaction ID : SE.42222 ate of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 7 2021
Name of Federal Candidate:		<b>X</b> Support	Office So	ought: House District: 00
RUBIO, MARCO, , ,		Oppose	Pre	esident State: FL
Calendar Year-To-Date Per Election for Office Sought	T	907.44	Disburse 2022	ment For:  Primary
Full Name of Payee	,	□ Meme	Itam Di	ate of Public Distribution/Dissemination
The Lukens Company		∐ Memo	item   Do	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				09 20 2021
2000 Ommington Na			Ar	mount
City	State	Zip Code		117.25
Arlington	VA	22206		ransaction ID : SE.42224 ate of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>x</b> Support	Office So	ought: X House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Pre	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	302.48	Disburse 2022	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures				469.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• • _	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 57 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amo	punt
City	State	Zip Code	-	117.25
Arlington	VA	22206	<b>Trai</b> Date	nsaction ID : SE.42225 e of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>X</b> Support	Office Sou	ght: X House District: 05
SCHRADER, KURT, , ,		Oppose	Pres	ident Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	, , ,	302.48	Disburseme 2022	ent For:
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amo	punt
City	State	Zip Code	— г	117.25
Arlington	VA	22206		nsaction ID : SE.42226 e of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 7 2021
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 08
SCHRIER, KIM DR., , ,		<b>x</b> Oppose	Pres	ident Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	1 1	302.48	Disburseme 2022	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures.				234.50
, ,			, <u>-</u>	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed]	M = M	20 2021
Signature		Date	9 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 58 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee			Item Da	te of Public Distribution/Dissemination
The Lukens Company				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			An	nount
City	State	Zip Code		117.25
Arlington	VA	22206		ansaction ID : SE.42227 te of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office So	ught: House District: 00
SCHUMER, CHARLES E., , ,		<b>x</b> Oppose	Pre	sident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		302.48	Disburser 2022	
Full Name of Payer	, ,	□ Mama	Itaan Da	Other (specify) ►te of Public Distribution/Dissemination
Full Name of Payee The Lukens Company		∐ Memo	item Da	M M / D D / Y Y Y Y
Mailing Address 2800 Shirlington Rd				09 20 2021
2000 Offillington Nu			An	nount
City	State	Zip Code		117.25
Arlington	VA	22206	I	ransaction ID : SE.42228 te of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>x</b> Support	Office So	ught:  House District:06
SCHWEIKERT, DAVID S., , ,		Oppose	Pre	sident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	302.48	Disburser 2022	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	234.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• •	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	'ed1 -	M = M	/ D D / Y Y Y Y Y Y Y 2021
Signature		Date	e 11	20 2021

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 59 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repor	rt filed on	"M / D "D / Y "Y "Y "Y
Full Name of Payee The Lukens Company		☐ Memo I	_	of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			-	09 20 2021
			Amour	nt
City	State	Zip Code		234.50
Arlington	VA	22206		saction ID : SE.42229 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 2021
Name of Federal Candidate:		Support	Office Sough	nt: House District: 00
SINEMA, KYRSTEN, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	2419.85	Disbursemen	
Full Name of Payee The Lukens Company		☐ Memo I	tem Date o	of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Amour	nt
City	State	Zip Code		117.25
Arlington	VA	22206	Trans	saction ID : SE.42230 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	nt: K House District: 08
SLOTKIN, ELISSA, , ,		<b>X</b> Oppose	Preside	- NAI
Calendar Year-To-Date Per Election for Office Sought	7 7	302.48	Disbursemen 2022 O	ont For: Primary   ✓ General  Other (specify)  ✓
(a) SUBTOTAL of Itemized Independent Expenditures	·		, [	351.75
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. —	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically File	led] Date	M = M /	20 2021

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 60 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M   M   / D   D   / Y   Y   Y   Y   Y
Full Name of Payee The Lukens Company		☐ Memo	Item Date	of Public Distribution/Dissemination
, ,				09 20 7 2021
Mailing Address 2800 Shirlington Rd			Amo	unt
City	Ctoto	Zin Codo		117.75
City	State	Zip Code 22206	Tron	117.25 saction ID : SE.42231
Arlington	VA	22206		of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		M 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: X House District:07
SPANBERGER, ABIGAIL, , ,		× Oppose	Presid	\\\\
Octobro Vene To Date			Disburseme	
Calendar Year-To-Date Per Election for Office Sought	, , ,	302.48	2022 —	Other (specify)
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y
Mailing Address				09 20 2021
2800 Shirlington Rd			Amo	unt
City	State	Zip Code	<b>—</b> г	117.25
Arlington	VA	22206	Trar	nsaction ID : SE.42232
Purpose of Expenditure	VA	22200	Date	of Disbursement or Obligation
Printing Printing		Category/ Type		M 09 / 30 / Y 2021
Name of Federal Candidate:		<b>x</b> Support	Office Soug	yht: K House District: 48
STEEL, MICHELLE, , ,		Oppose	Presid	dent Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		302.49	Disburseme	ent For: Primary X General
Per Election for Office Sought	7 7		2022	Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures	·		<b>&gt;</b>	234.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	[ed]	M = M /	20 2021

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				Amount
				Allouit
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42233 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought:
STEVENS, HALEY, , ,		X Oppose		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	, , ,	302.49	Disbu 2022	rsement For:  Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				09 20 / Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				09 20 2021
2000 Chinington Nu				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42234  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 30 / Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought:
TENNEY, CLAUDIA, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date		202.40	1	rsement For: Primary X General
Per Election for Office Sought	7 7	302.49	2022	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures			•	234.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		▶	
(c) TOTAL Independent Expenditures				
(c) TOTAL Independent Experionates			▶	
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 1	20 2021

Signature

#### SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES			PAGE 62 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	i filed on M M / D D / Y Y Y Y
Full Name of Payee The Lukens Company		☐ Memo It	M - M / D - D / Y - Y - Y
Mailing Address 2800 Shirlington Rd			09 20 2021 Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42235  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 30 / Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Sought: House District: 00
TESTER, JON, , ,		Oppose	President Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	7 1 7	302.49	Disbursement For: ☐ Primary
Full Name of Payee The Lukens Company		☐ Memo It	Date of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd			Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42236  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought: House District: 00
TILLIS, THOM R. SEN., , ,		Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	, , ,	604.97	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	<b>;</b>		234.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•	·
Gross, Jennifer, , ,	[Electronically Fil	ded] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 63 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee The Lukens Company		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 Shirlington Rd				09 20 2021 Amount
				Amount
City	State	Zip Code		234.50
Arlington	VA	22206		<b>Transaction ID : SE.42237</b> Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		<b>X</b> Support	Office	Sought: House District: 00
TOOMEY, PATRICK JOSEPH, , ,		Oppose		President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	604.96	Disbur 2022	sement For: Primary   General  Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Lukens Company				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd				Amount
City	State	Zip Code		117.25
Arlington	VA	22206		Transaction ID : SE.42238 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought:  House District: 14
UNDERWOOD, LAUREN, , ,		X Oppose		President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		302.49	Disbur 2022	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures				351.75
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			▶	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 -	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 11	20 2021

TEMIZED INDEFENDENT EXPENDITORES	•		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on Man / Dad / Yayayay
Full Name of Payee The Lukens Company		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 2800 Shirlington Rd			09 20 2021 Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42239 Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought:   House District: 21
VALADAO, DAVID, , ,		Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.49	Disbursement For: ☐ Primary <b>X</b> General 2022 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
The Lukens Company			09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amount
City	State	Zip Code	117.25
Arlington	VA	22206	Transaction ID : SE.42240  Date of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type	09 / 30 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:
VAN DUYNE, ELIZABETH ANN, , ,		Oppose	President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	302.49	Disbursement For:  Primary  General 2022  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	·s		234.50
(b) SUBTOTAL of Unitemized Independent Expendit	ures		-
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized	•	
Gross, Jennifer, , ,	[Electronically File	ed] Date	e 11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature			

TEMIZED INDEPENDENT EXPENDITURES	5			PAGE 65 OF 149	
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X	
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼	
				C C00530766	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination	
The Lukens Company				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 2800 Shirlington Rd			A	mount	
City	State	Zip Code		117.25	
Arlington	VA	22206		ransaction ID : SE.42241 ate of Disbursement or Obligation	
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021	
Name of Federal Candidate:		<b>✗</b> Support	Office S	ought: X House District: 02	
WAGNER, ANN L., , ,		Oppose		esident Senate State: MO	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	302.49	Disburse 2022	ement For: Primary <b>X</b> General  Other (specify) ▶	
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination	
The Lukens Company				M M / D D / Y Y Y	
Mailing Address 2000 Chidicator Pd					
2800 Shirlington Rd			A	mount	
City	State	Zip Code		351.75	
Arlington	VA	22206		ransaction ID : SE.42242 ate of Disbursement or Obligation	
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021	
Name of Federal Candidate:		Support	Office S	ought: House District: 00	
WARNOCK, RAPHAEL, , ,		<b>x</b> Oppose	Pr	esident State: GA	
Calendar Year-To-Date		907.44		ement For: Primary 🗶 General	
Per Election for Office Sought	7-1-7-	307.144	2022	Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditure	·s		•	469.00	
(b) SUBTOTAL of Unitemized Independent Expendit	ures				
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized	•		· · · · · · · · · · · · · · · · · · ·	
Gross, Jennifer, , ,	[Floatmanic -IL F	lodi	M = M	/ D D / Y Y Y Y	
Signature	[Electronically Fi	Date Date	e 11	20 2021	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 66 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
The Lukens Company				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amo	unt
City	State	Zip Code	-	117.26
Arlington	VA	22206		saction ID : SE.42243 of Disbursement or Obligation
Purpose of Expenditure Printing		Category/ Type		09 / 30 / 2021
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 07
WILD, SUSAN, , ,		X Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 7	302.50	Disburseme	ont For: ☐ Primary 🗶 General  Other (specify) ▶
Full Name of Payee The Mail Haus		☐ Memo	1 _	of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amo	unt
City	State	Zip Code		39.60
De Pere	WI	54115		nsaction ID : SE.42064 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 32
ALLRED, COLIN, , ,		x Oppose	Presid	dent Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	185.23	Disburseme	ent For: Primary X General  Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	156.86
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• [	
(c) TOTAL Independent Expenditures			•	1.7.1.1.7.1.1.7.1.1
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M M /	20 2021
Signature		Date	11	2021

PAGE 67 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee The Mail Haus 20 2021 Mailing Address 1745 Suburban Drive Amount State Zip Code 39.60 City WI 54115 Transaction ID: SE.42065 De Pere Date of Disbursement or Obligation Purpose of Expenditure Category/ Postage 09 16 2021 Type Name of Federal Candidate: 03 Support Office Sought: **X** House District: AXNE, CINDY, , , Oppose IΑ President State: Senate Disbursement For: Primary **X** General Calendar Year-To-Date 185.23 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item The Mail Haus 2021 20 09 Mailing Address 1745 Suburban Drive Amount 39.60 City State Zip Code De Pere Transaction ID: SE.42066 WI 54115 Date of Disbursement or Obligation Purpose of Expenditure Category/ Postage 16 2021 09 Type Name of Federal Candidate: Support Office Sought: House District: AYOTTE, KELLY A, , , NH X Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 476.49 2022 Per Election for Office Sought Other (specify) ▶ 79.20 (a) SUBTOTAL of Itemized Independent Expenditures ...... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 68 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Itom Da	te of Public Distribution/Dissemination
The Mail Haus		□ Memo	item Ba	09 20 2021
Mailing Address 1745 Suburban Drive			Am	nount
City	State	Zip Code	— г	39.60
De Pere	WI	54115		ansaction ID : SE.42067 te of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 7 2021
Name of Federal Candidate:		<b>X</b> Support	Office So	ought: X House District: 02
BACON, DONALD J, , ,		Oppose	l	esident Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	185.23	Disburser 2022	ment For:  Primary <b>X</b> General Other (specify) ▶
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Am	nount
	Ta	I =	— г	70.00
City De Pere	State	Zip Code 54115		79.20 ransaction ID : SE.42068 tte of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: House District: 00
BENNET, MICHAEL F., , ,		X Oppose	Pre	esident X Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	516.09	Disburser 2022	ment For: ☐ Primary <b>X</b> General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	118.80
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed]	M = M	20 2021
Signature		Date	9 11	20 2021

				FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC						
				C C00530766		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y		
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination		
The Mail Haus				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1745 Suburban Drive				Amount		
				Amount		
City	State	Zip Code		39.60		
De Pere	WI	54115		Transaction ID : SE.42069  Date of Disbursement or Obligation		
Purpose of Expenditure Postage		Category/ Type		09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought: House District: 05		
BICE, STEPHANIE, , ,		Oppose		President Senate State: OK		
Calendar Year-To-Date Per Election for Office Sought	7   7	185.23	Disbu 2022	rsement For:  Primary		
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination		
The Mail Haus				M M / D D / Y Y Y Y		
Mailing Address 1745 Suburban Drive				09 20 2021		
1745 Suburban Drive				Amount		
City	State	Zip Code		39.60		
De Pere	WI	54115		Transaction ID : SE.42070 Date of Disbursement or Obligation		
Purpose of Expenditure	1	Category/	$\neg$	M M / D D / Y Y Y		
Postage		Type		09 16 2021		
Name of Federal Candidate:		Support	Office	Sought: House District:		
BIDEN, JOSEPH R JR, , ,		<b>x</b> Oppose	x	President Senate State:		
Calendar Year-To-Date		185.23	1	rsement For: Primary 🗶 General		
Per Election for Office Sought	7	105.25	2022	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			•	79.20		
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•			
(c) TOTAL Independent Expenditures						
(c) 10 M2 maoponadm Experianated			•			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized					
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M	M / D D / Y Y Y Y Y		
Signature		Date	e 11	20 2021		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 70 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Itom Da	te of Public Distribution/Dissemination
The Mail Haus		□ Iviemo	item ba	09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Am	ount
City	State	Zip Code	— Г	39.60
De Pere	WI	54115		ansaction ID : SE.42071 te of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office So	ught: X House District: 03
BOEBERT, LAUREN, , ,		Oppose	l	sident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7 7	185.23	Disbursen 2022	nent For:  Primary
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
The Mail Haus				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Am	ount
Oth	04-4-	75-0-1-	— г	39.60
City De Pere	State	Zip Code 54115		ansaction ID : SE.42072 te of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ught: X House District: 07
BOURDEAUX, CAROLYN, , ,		X Oppose	Pre	sident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	185.23	Disbursen 2022	nent For: ☐ Primary <b>X</b> General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· •	79.20
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed]	M = M	/ D D / Y Y Y Y Y Y 2021
Signature	•	Date	9 11	2021

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITORES				PAGE 71 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amo	
City	State	Zip Code	-	39.60
De Pere	WI	54115		nsaction ID : SE.42073 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
BURR, RICHARD M, , ,		Oppose	Presi	NC NC
Calendar Year-To-Date Per Election for Office Sought	7 7	330.87	Disburseme 2022	ent For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y O 2021
Mailing Address 1745 Suburban Drive			Amo	unt
- Cu		7: 0 !		
City De Pere	State	Zip Code 54115	Tra	39.60 nsaction ID : SE.42075
Purpose of Expenditure	VVI			e of Disbursement or Obligation
Postage		Category/ Type		09 / 16 / 2021
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 17
BUSTOS, CHERI, , ,		<b>x</b> Oppose	Presi	dent Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		185.23	Disburseme	ent For: Primary General
T et Election foi Office 300gft	7 7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• [	79.20
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically File	ed]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	9 11	20 2021

Signature

#### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 72 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
THE TENT OF EACH OF THE				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive				09 20 2021
			Amo	ount
City	State	Zip Code		39.60
De Pere	WI	54115		nsaction ID : SE.42076 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Sou	ght: X House District: 31
CARTER, JOHN R. REP., , ,		Oppose		ident Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7   1   7	185.23	Disbursem 2022	ent For: Primary   General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amo	ount
City	Ctata	Zin Codo		39.60
City De Pere	State	Zip Code 54115	Tra	nsaction ID : SE.42079
Purpose of Expenditure Postage		Category/ Type	Date	e of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght:  House District: 08
CARTWRIGHT, MATTHEW A., , ,		X Oppose		ident Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	185.23	Disbursem 2022	ent For:
•				
(a) SUBTOTAL of Itemized Independent Expenditures	·		<b>-</b>	79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	[ed]	M = M	/ D D / Y Y Y Y Y Y Y 2021

IEI	MIZED INDEPENDENT EXPENDITURES				PAGE 73 OF 149 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
W	OMEN SPEAK OUT PAC				C C00530766
Che	ck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
	Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
	The Mail Haus				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1745 Suburban Drive				Amount
$\vdash$	City	State	Zip Code		39.60
	De Pere	WI	54115		Transaction ID : SE.42080
	Purpose of Expenditure Postage		Category/ Type		Date of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate:		Support	Office	Sought: X House District: 06
	CASTEN, SEAN, , ,		X Oppose		President Senate State: IL
	Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disbu 2022	rsement For: Primary <b>X</b> General  Other (specify) ▶
t	Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
	The Mail Haus		_		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1745 Suburban Drive				
					Amount
	City	State	Zip Code		79.20 Transaction ID : SE.42082
	De Pere	WI	54115		Date of Disbursement or Obligation
	Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y
	Name of Federal Candidate:		Support	Office	Sought: House District: 00
	CORTEZ MASTO, CATHERINE, , ,		<b>x</b> Oppose		President Senate State: NV
	Calendar Year-To-Date Per Election for Office Sought	7	370.46	Disbu 2022	rsement For: Primary <b>X</b> General  Other (specify) ▶
(a	a) SUBTOTAL of Itemized Independent Expenditures	i			118.80
(I	b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(	c) TOTAL Independent Expenditures				
,	,,				
W	Inder penalty of perjury I certify that the independe vith, or at the request or suggestion of, any candida arty committee) any political party committee or its	ate or authorized			
	Gross, Jennifer, , ,	[Electronically Fil	led]	M =	1 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature		Date	e 1	1 20 2021

Signature

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES	3			PAGE 74 OF 149		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X		
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼		
				C C00530766		
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed o	n M M / D D / Y Y Y Y		
Full Name of Payee The Mail Haus		☐ Memo	Item	Date of Public Distribution/Dissemination		
Mailing Address 1745 Suburban Drive	09 20 2021					
			'	Amount		
City	State	Zip Code		39.60		
De Pere	WI	54115		Transaction ID : SE.42083 Date of Disbursement or Obligation		
Purpose of Expenditure Postage		Category/ Type		09 16 7 2021		
Name of Federal Candidate:		Support	Office	Sought:  House District: 02		
CRAIG, ANGELA DAWN, , ,		Oppose		President Senate State: MN		
Calendar Year-To-Date				sement For: Primary X General		
Per Election for Office Sought	<u></u>	185.23	2022	Other (specify)		
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination		
The Mail Haus				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1745 Suburban Drive	Mailing Address					
1743 Subulban Drive				Amount		
City	State	Zip Code		39.60		
De Pere	WI	54115		Transaction ID : SE.42084 Date of Disbursement or Obligation		
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y		
Postage		Туре		09 16 2021		
Name of Federal Candidate:		Support	Office	Sought:   House District: 13		
CRIST, CHARLIE JOSEPH, , ,		<b>x</b> Oppose	F	President Senate State: FL		
Calendar Year-To-Date		100.00	Disburs	sement For: Primary 🗶 General		
Per Election for Office Sought	7	185.23	2022	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditure	s		•	79.20		
(b) SUBTOTAL of Unitemized Independent Expendit	ures		•			
(a) TOTAL landers and each Form and discuss						
(c) TOTAL Independent Expenditures			<b>•</b>			
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or it	date or authorized	•		· · · · · · · · · · · · · · · · · · ·		
Gross, Jennifer, , ,	[Electronically Fi	led]	M = 1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signatura		Date	11	20 2021		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 75 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amou	unt
City	State	Zip Code	— F	39.60
De Pere	WI	54115	Tran:	saction ID : SE.42086 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: X House District:03
DAVIDS, SHARICE, , ,		x Oppose	Presid	dent Senate State: KS
Calendar Year-To-Date Per Election for Office Sought	, , ,	185.23	Disbursement 2022	nt For:  Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
The Mail Haus				09
Mailing Address 1745 Suburban Drive			Amou	unt
City	State	Zip Code	— r	39.60
De Pere	WI	54115		saction ID : SE.42087 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>x</b> Support	Office Soug	ht: X House District: 04
DEFAZIO, PETER A, , ,		Oppose	Presid	dent Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	, , ,	185.23	Disburseme	nt For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures			· [	79.20
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. —	
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed]	M = M /	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 76 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u>'</u>
WOMEN SPEAK OUT PAC				C C00530766
				C 600330700
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42088 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 2021
Name of Federal Candidate:		Support	Office	Sought: House District: 19
DELGADO, ANTONIO, , ,		<b>✗</b> Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		185.23	Disbur 2022	sement For: Primary
	7 7	17,000	2022	Other (specify) ▶
Full Name of Payee The Mail Haus		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				09 20 2021
1745 Suburban Drive				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42089 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought:  M House District: 07
FISCHBACH, MICHELLE, , ,		Oppose		President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		185.23	Disbur 2022	sement For: Primary General
	, , ,			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·			79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	led1 -	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 11	20 2021

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive				
				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42090 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought:
FLETCHER, ELIZABETH, , ,		Oppose		President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disbu 2022	rsement For:  Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus		Weine	10111	M M / D D / Y Y Y
Mailing Address				09 20 2021
1745 Suburban Drive				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42091 Date of Disbursement or Obligation
Purpose of Expenditure Postage	1	Category/	$\neg$	M M / D D / Y Y Y Y
rostage		Type		09 16 2021
Name of Federal Candidate:		Support	Office	Sought: House District: 03
GARAMENDI, JOHN, , ,		<b>x</b> Oppose		President Senate State: CA
Calendar Year-To-Date		185.23	1	rsement For: Primary 🗶 General
Per Election for Office Sought	7 7		2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	79.20
(h) CURTOTAL of Unitersity of Index on death Fundamental				
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures				
			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 11	20 2021

PAGE 78 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee The Mail Haus 09 20 2021 Mailing Address 1745 Suburban Drive Amount State Zip Code 39.60 City WI 54115 Transaction ID: SE.42093 De Pere Date of Disbursement or Obligation Purpose of Expenditure Category/ Mailer Production 09 16 2021 Type Name of Federal Candidate: 02 **X** Support Office Sought: **X** House District: GARBARINO, ANDREW, , , NY Oppose President State: Senate Disbursement For: Primary **X** General Calendar Year-To-Date 185.23 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item The Mail Haus 2021 20 09 Mailing Address 1745 Suburban Drive Amount 39.60 City State Zip Code De Pere Transaction ID: SE.42094 WI 54115 Date of Disbursement or Obligation Purpose of Expenditure Category/ Postage 16 2021 09 Type Name of Federal Candidate: 25 x Support Office Sought: **X** House District: GARCIA, MICHAEL, , , CA Oppose President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 185.23 2022 Per Election for Office Sought Other (specify) ▶ 79.20 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date Signature

TEMIZED INDEPENDENT EXPENDITORES				PAGE 79 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amo	
City	State	Zip Code	-	39.60
De Pere	WI	54115		nsaction ID : SE.42095 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 26
GIMENEZ, CARLOS, , ,		Oppose	Pres	
Calendar Year-To-Date Per Election for Office Sought	7 7	185.23	Disburseme 2022	ent For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y 2021
Mailing Address 1745 Suburban Drive			A m a	
			Amo	
City	State	Zip Code		39.60
De Pere	WI	54115		nsaction ID : SE.42096 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / 2021
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 02
GOLDEN, JARED, , ,		<b>x</b> Oppose	Pres	ident Senate State: ME
Calendar Year-To-Date		185.23	Disburseme	ent For: Primary General
Per Election for Office Sought	7 7		2022	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	79.20
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically File	ed1 -	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 80 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo	itom = site s	f Public Distribution/Dissemination
Mailian Adduses				09 / 20 / 2021
Mailing Address 1745 Suburban Drive			Amoun	ıt
City	State	Zip Code		39.60
De Pere	WI	54115		action ID : SE.42097  f Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 / Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Sought	: X House District: 23
GONZALES, ERNEST ANTHONY TONY, , , II		Oppose	Preside	
Calendar Year-To-Date			Disbursement	For: Primary Seneral
Per Election for Office Sought	7 7	185.23	2022 Ot	ther (specify)
Full Name of Payee		Memo	Item Date o	f Public Distribution/Dissemination
The Mail Haus				M / D D / Y Y Y Y
Mailing Address			_ L	09 20 2021
1745 Suburban Drive			Amoun	t
City	State	Zip Code		39.60
De Pere	WI	54115		action ID : SE.42099 f Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	M	09 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought	t: X House District: 15
GONZALEZ, VICENTE, , ,		<b>x</b> Oppose	Preside	nt Senate State: TX
Calendar Year-To-Date		185.23	Disbursement	For: Primary General
Per Election for Office Sought	7-1-1-7-	103.23	2022 Ot	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			<b>.</b>	79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>•</b>	
(c) TOTAL Independent Expenditures			· [	
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1	M = M /	DDD / YTYTY
Signature	Гиси описину I ш	_ Date	11	20 2021

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NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive				
				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42100 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought:  Mouse District: 05
GOOD, ROBERT G., , ,		Oppose		President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		185.23	Disbu 2022	rsement For: Primary General
	,	□ Massa	lt a sa	Other (specify) ►  Date of Public Distribution/Dissemination
Full Name of Payee The Mail Haus		∐ Memo	item	M M / D D / Y Y Y Y
Mailing Address				09 20 2021
1745 Suburban Drive				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42101 Date of Disbursement or Obligation
Purpose of Expenditure Postage	1	Category/	$\neg$	M M / D D / Y Y Y
Postage		Type		09 16 2021
Name of Federal Candidate:		Support	Office	Sought: House District: 05
GOTTHEIMER, JOSH, , ,		<b>x</b> Oppose		President Senate State: NJ
Calendar Year-To-Date		185.23	1	rsement For: Primary X General
Per Election for Office Sought	7 7	100.20	2022	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures			•	79.20
(h) CURTOTAL of United in add to deep and art Fun and its united in the control of the control o				
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures				
			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M	M / D D / Y Y Y Y Y
Signature		Date	e 11	20 2021

Signature

SCHEDULE E (FEC FOIIII 3A)			
TEMIZED INDEPENDENT EXPENDITURES	j		PAGE 82 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D / Y Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo Ite	Date of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive			09 20 2021 Amount
	1011	T 7 0 1	
City	State	Zip Code	118.80 Transaction ID : SE.42102
De Pere	WI	54115	Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support (	Office Sought: House District: 00
GRASSLEY, CHARLES E, , ,		Oppose	President X Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7 7		Disbursement For: Primary   General  Other (specify)    Other (specify)   Other (specify)   Other (specify)   Other (specify)   Other (specify)   Other (specify)   Other (specify)   Other (specify)   Other (specify)
Full Name of Payee The Mail Haus		☐ Memo Ite	
Mailing Address 1745 Suburban Drive			Amount
City	State	Zip Code	79.20
De Pere	WI	54115	Transaction ID : SE.42103  Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support (	Office Sought: House District: 00
HASSAN, MARGARET WOOD, , ,		x Oppose	President State: NH
Calendar Year-To-Date Per Election for Office Sought	7 7	FFF 00	Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	S		198.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		<b>•</b>
(c) TOTAL Independent Expenditures			<b>&gt;</b>
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	late or authorized	•	· · · · · · · · · · · · · · · · · · ·
Gross, Jennifer, , ,	[Electronically Fil	led] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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TEMIZED INDEPENDENT EXPENDITURES			PAGE 83 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo	Item Date of Public Distribution/Dissemination
The Mail Haus			09 / 20 / Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amount
City	State	Zip Code	39.60
De Pere	WI	54115	Transaction ID : SE.42104 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Sought:   House District: 02
HERRELL, STELLA YVETTE, , ,		Oppose	President Senate State: NM
Calendar Year-To-Date		185.23	Disbursement For: Primary X General
Per Election for Office Sought	7-1-1-7	103.23	2022 ☐ Other (specify) ▶
Full Name of Payee The Mail Haus		☐ Memo	Item Date of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive			Amount
City	State	Zip Code	39.60
De Pere	WI	54115	Transaction ID : SE.42105  Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>x</b> Support	Office Sought:  House District: 01
ARENHOLZ, ASHLEY HINSON, , ,		Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	185.23	Disbursement For:  Primary  Seneral 2022  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		> 79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• •
(c) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized		
Gross, Jennifer, , ,	[Electronically Fil	[ed]	e 11 20 / Y Y Y Y Y Y Y
Signature		Date	e 11 20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 84 OF 149 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
WOMEN SPEAK OUT PAC	WOMEN SPEAK OUT PAC						
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y			
Full Name of Payee The Mail Haus		☐ Memo	Item Da	ate of Public Distribution/Dissemination			
Mailing Address 1745 Suburban Drive			An	09 20 2021 nount			
City	State	Zip Code	— г	39.60			
De Pere	WI	54115		ansaction ID : SE.42107 ate of Disbursement or Obligation			
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate:		Support	Office Sc	ought: X House District:04			
HORSFORD, STEVEN ALEXZANDER, , ,		<b>x</b> Oppose	Pre	esident Senate State: NV			
Calendar Year-To-Date Per Election for Office Sought	7 1 7	185.23	Disburser 2022	ment For: Primary   ✓ General  Other (specify)			
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination			
The Mail Haus				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1745 Suburban Drive			An	nount			
City	State	Zip Code	<u> —</u> Г	39.60			
De Pere	WI	54115		ransaction ID : SE.42108 ate of Disbursement or Obligation			
Purpose of Expenditure Postage		Category/ Type		M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate:		<b>✗</b> Support	Office Sc	ought: X House District: 08			
HUDSON, RICHARD L. JR., , ,		Oppose	Pre	esident Senate State: NC			
Calendar Year-To-Date Per Election for Office Sought	7 7	185.23	Disburser 2022	ment For:			
(a) SUBTOTAL of Itemized Independent Expenditures	·		· • _	79.20			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		, г				
(b) GODICIAL OF CHICAMIZED INDEPENDENT EXPENDITU	100						
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized						
Gross, Jennifer, , ,	[Electronically Fi	led1 –	M = M	/ D D / Y Y Y Y			
Signature	T	Date	e 11	20 2021			

TEMIZED INDEPENDENT EXPENDITURES				PAGE 85 OF 149 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
WOMEN SPEAK OUT PAC	VOMEN SPEAK OUT PAC					
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y		
Full Name of Payee The Mail Haus		☐ Memo	Item	Date of Public Distribution/Dissemination		
Mailing Address 1745 Suburban Drive				09 20 2021 Amount		
		T 0 1				
City	State	Zip Code 54115		118.80 Transaction ID : SE.42109		
De Pere	VVI	34113	I	Date of Disbursement or Obligation		
Purpose of Expenditure Postage		Category/ Type		09 / 16 / 2021		
Name of Federal Candidate:		<b>X</b> Support	Office	Sought: House District: 00		
JOHNSON, RON HAROLD MR., , ,		Oppose	F	President State: WI		
Calendar Year-To-Date Per Election for Office Sought	<i>A</i>     <i>A</i>	555.69	Disburs	sement For: Primary General		
5 H.M. (B	1			Other (specify)		
Full Name of Payee The Mail Haus		∐ Memo	Item	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1745 Suburban Drive				Amount		
City	State	Zip Code		198.00		
De Pere	WI	54115	I	Transaction ID : SE.42110 Date of Disbursement or Obligation		
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office	Sought: House District: 00		
KELLY, MARK, , ,		x Oppose	F	President X Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought	7 7	1363.05	Disburs 2022	sement For:  Primary		
•						
(a) SUBTOTAL of Itemized Independent Expenditures				316.80		
				, , , , , , , , ,		
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•			
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
Gross, Jennifer, , ,	Electronically Fil	led1	M = 1	M / D D / Y Y Y Y Y		
Signature	Гиси описину Г и	Date Date	9 11	20 2021		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 86 OF 149 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
WOMEN SPEAK OUT PAC				C C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	1 = M / D = D / Y = Y = Y	
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination	
The Mail Haus		Wemo	_	09 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1745 Suburban Drive			Amou	unt	
City	State	Zip Code	$-\Gamma$	39.60	
De Pere	WI	54115		saction ID : SE.42111 of Disbursement or Obligation	
Purpose of Expenditure Postage		Category/ Type		09 16 / Y Y Y Y Y Y	
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: X House District: 39	
KIM, YOUNG, , ,		Oppose	Presid		
Calendar Year-To-Date Per Election for Office Sought	T   T	185.23	Disburseme	nt For: Primary <b>X</b> General  Other (specify) ▶	
Full Name of Payee The Mail Haus		☐ Memo		of Public Distribution/Dissemination	
THE Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1745 Suburban Drive			Amou	unt	
City	State	Zip Code		39.60	
De Pere	WI	54115		saction ID : SE.42112 of Disbursement or Obligation	
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 03	
KIND, RONALD JAMES, , ,		X Oppose	Presid	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	185.23	Disburseme	nt For:  Primary	
·			-		
(a) SUBTOTAL of Itemized Independent Expenditures			· • [	79.20	
(b) SUBTOTAL of Unitemized Independent Expenditu	res				
			,		
(c) TOTAL Independent Expenditures			· [	1.7.1.7.1.	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Gross, Jennifer, , ,	Electronically Fil	ed]	M M /	20 2021	
Signature		Date	, !!	2021	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 87 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Mail Haus		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive				09 20 2021 mount
		T. 0		
City	State	Zip Code 54115		39.60 Transaction ID : SE.42113
De Pere	WI	34113		late of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought:   House District: 17
LAMB, CONOR, , ,		× Oppose	PI	resident Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		185.23	Disburse	ement For: Primary General
Edit Marco of Proces			5	Other (specify)
Full Name of Payee The Mail Haus		∐ Memo	Item L	ate of Public Distribution/Dissemination
Mailing Address				09 20 2021
1745 Suburban Drive			А	mount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42114 late of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / 2021
Name of Federal Candidate:		Support	Office S	ought: House District: 00
LAXALT, ADAM, , ,		X Oppose	PI	resident Senate State: CO
Calendar Year-To-Date		555.00		ement For: Primary X General
Per Election for Office Sought	7 7	555.69	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	79.20
			-	
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		. •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1	M = M	/ D D / Y Y Y Y
Signature	zacaomumy Fu	Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 88 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amou	unt
City	State	Zip Code	-	39.60
De Pere	WI	54115	<b>Tran</b> Date	saction ID : SE.42115 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: X House District:03
LEE, SUSIE, , ,		<b>x</b> Oppose	Presid	dent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	, , ,	185.23	Disburseme 2022	nt For:  Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
The Mail Haus				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amou	unt
City	State	Zip Code	$ \Gamma$	39.60
De Pere	WI	54115	<b>I</b>	saction ID : SE.42116 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District: 49
LEVIN, MIKE, , ,		<b>x</b> Oppose	Presid	dent Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	, , ,	185.23	Disburseme 2022 (	nt For:  Primary
(a) CUPTOTAL of the critical hadron and set Franco distance				70.00
(a) SUBTOTAL of Itemized Independent Expenditures.			•	79.20
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed]	M = M /	20 2021
Signature		Date	11	2021

Signature

## SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES			PAGE 89 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D / Y Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo Ite	M M / D D / Y Y Y
Mailing Address 1745 Suburban Drive			09 20 2021 Amount
City	State	Zip Code	39.60
De Pere	WI	54115	Transaction ID : SE.42117 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:    House District: 02
LURIA, ELAINE, , ,		Cupport Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7		Disbursement For: Primary   ☐ Primary  ☐ General  Other (specify)  ☐ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Full Name of Payee The Mail Haus		☐ Memo Ita	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amount
City	State	Zip Code	39.60
De Pere	WI	54115	Transaction ID : SE.42118  Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:			Office Sought:  House District: 01
MACE, NANCY, , ,		Oppose	President Senate State: SC
Calendar Year-To-Date Per Election for Office Sought	7	405.00	Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures			79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>&gt;</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
Gross, Jennifer, , ,	Electronically Fil	ded] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive				Amount
				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42119 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 07
MALINOWSKI, TOM, , ,		X Oppose		President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disbu 2022	rsement For: Primary   General  Other (specify) ▶
Full Name of Payee		Memo	Itom	Date of Public Distribution/Dissemination
The Mail Haus		Wemo	Itom	M M / D D / Y Y Y Y
Mailing Address				09 20 2021
1745 Suburban Drive				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42120 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\neg$	M M / D D / Y Y Y
Postage		Type		09 16 2021
Name of Federal Candidate:		🗶 Support	Office	Sought: House District: 11
MALLIOTAKIS, NICOLE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date		185.23		rsement For: Primary X General
Per Election for Office Sought	7 7	100.20	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	79.20
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
(c) TOTAL Independent Expenditures				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M	M / D D / Y Y Y Y Y
Signature		Date	e 1	20 2021

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive				Amount
				Amount
City	State	Zip Code		79.20
De Pere	WI	54115		<b>Transaction ID : SE.42121</b> Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought: House District: 00
MANCHIN III, JOE, , ,		Oppose		President State: WV
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	370.46	Disbu 2022	rsement For: Primary   General  Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y
Mailing Address 1745 Suburban Drive				09 20 2021
1743 Subulban Drive				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42122 Date of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y
Postage		Type		09 16 2021
Name of Federal Candidate:		<b>x</b> Support	Office	Sought: House District: 00
MCSALLY, MARTHA, , ,		Oppose		President Senate State: AZ
Calendar Year-To-Date		1402.65		rsement For: Primary 🗶 General
Per Election for Office Sought	7-1-5-	1402.03	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	118.80
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
(c) TOTAL Independent Expenditures				
, ,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M =	M / D D / Y Y Y Y Y
Signature		Date	e 1′	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 92 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Mail Haus		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive			An	09 20 2021
City	State	Zip Code	— г	39.60
De Pere	WI	54115		ansaction ID : SE.42123 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 2021
Name of Federal Candidate:		<b>✗</b> Support	Office So	ought: X House District: 02
MILLER-MEEKS, MARIANNETTE JANE, , ,		Oppose	Pre	esident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disburser 2022	ment For: Primary   ✓ General  Other (specify)
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
The Mail Haus		_ шеше		09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			An	nount
City	State	Zip Code	<u> —</u> г	39.60
De Pere	WI	54115		ransaction ID : SE.42124 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought:   House District: 07
MURPHY, STEPHANIE, , ,		x Oppose	Pre	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disburser 2022	ment For:
•				
(a) SUBTOTAL of Itemized Independent Expenditures			• •	79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	ledl –	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	comouny I'll	Date	e 11	20 2021

Signature

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES	,			PAGE 93 OF 149
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT FAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		W W / D D / Y Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive			Amou	09 20 2021 unt
	T a	1		
City	State	Zip Code 54115	Tran	39.60 saction ID : SE.42125
De Pere	WI	54115		of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	$\exists \mid \llbracket$	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Soug	ht: X House District: 22
NEHLS, TROY, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		185.23	Disbursement 2022	ont For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee The Mail Haus		☐ Memo	_	of Public Distribution/Dissemination
Mailing Address			L	09 20 2021
1745 Suburban Drive			Amou	unt
City	State	Zip Code	— r	39.60
De Pere	WI	54115		nsaction ID : SE.42126 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	$\Box \mid \Box$	M M 09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 01
O'HALLERAN, TOM, , ,		× Oppose	Presid	Δ7
Calendar Year-To-Date Per Election for Office Sought		185.23	Disbursemen 2022	ont For: Primary   General  Other (specify) ▶
				(-1
(a) SUBTOTAL of Itemized Independent Expenditures	<b>;</b>		•	79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [	
(c) TOTAL Independent Expenditures			· [	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically File	led] Date	M M /	20 2021

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive				Amount
				Allouit
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42127 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought: House District: 04
OWENS, BURGESS, , ,		Oppose		President Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disbu 2022	rsement For: Primary   General  Other (specify) ▶
Full Name of Payee		Memo	Itom	Date of Public Distribution/Dissemination
The Mail Haus		Wichio	Itom	M M / D D / Y Y Y Y
Mailing Address				09 20 2021
1745 Suburban Drive				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42128 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\neg$	M M / D D / Y Y Y
Postage		Type		09 16 2021
Name of Federal Candidate:		Support	Office	Sought: House District: 01
PAPPAS, CHRIS, , ,		<b>x</b> Oppose		President Senate State: NH
Calendar Year-To-Date		185.23		rsement For: Primary 🗶 General
Per Election for Office Sought	7 - 1 - 7 -	105.25	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	79.20
4) 01PT0T11 (11 % ) 11 1 1 1 1 5 1 1 1 1 1 1 1 1 1 1 1 1				
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 1′	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 95 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Mail Haus		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive			Am	09 20 2021
		T 0 1		
City  De Pere	State	Zip Code 54115	Tra	79.20 ansaction ID : SE.42129
Purpose of Expenditure Postage		Category/		te of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Type		
Name of Federal Candidate:		Support	Office So	
PELOSI, NANCY, , ,		<b>✗</b> Oppose	Pre	sident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 7	370.46	Disburser 2022	nent For:
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Am	nount
City	State	Zip Code	ΗГ	39.60
De Pere	WI	54115		ansaction ID : SE.42130 te of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 2021
Name of Federal Candidate:		<b>✗</b> Support	Office So	ught: X House District: 10
PERRY, SCOTT, , ,		Oppose	Pre	sident Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	T	185.23	Disburser 2022	nent For:  Primary
•				
(a) SUBTOTAL of Itemized Independent Expenditures			. •	118.80
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• •	
(c) TOTAL Independent Expenditures			• •	, ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 –	M = M	/ D D / Y Y Y Y
Signature		Date	e 11	20 2021

PAGE 96 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee The Mail Haus 09 20 2021 Mailing Address 1745 Suburban Drive Amount State Zip Code 39.60 City WI 54115 Transaction ID: SE.42131 De Pere Date of Disbursement or Obligation Purpose of Expenditure Category/ Postage 09 16 2021 Type Name of Federal Candidate: 45 Support Office Sought: **X** House District: PORTER, KATHERINE, , , Oppose CA President State: Senate Disbursement For: Primary **X** General Calendar Year-To-Date 185.23 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item The Mail Haus 2021 20 09 Mailing Address 1745 Suburban Drive Amount 79.20 City State Zip Code De Pere Transaction ID: SE.42132 WI 54115 Date of Disbursement or Obligation Purpose of Expenditure Category/ Postage 16 2021 09 Type Name of Federal Candidate: 00 x Support Office Sought: House District: PORTMAN, ROB THE HONORA, , , OH Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 370.46 2022 Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures ..... 118.80 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date Signature

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus				09 20 / Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive				
				Amount
City	State	Zip Code		39.60
De Pere	WI	54115		Transaction ID : SE.42133 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office	Sought: X House District: 21
ROY, CHIP, , ,		Oppose		President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disbu 2022	rsement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
The Mail Haus		Meme	110111	M M / D D / Y Y Y Y
Mailing Address 1745 Suburban Drive				09 20 2021
1745 Subulban Drive				Amount
City	State	Zip Code		118.80
De Pere	WI	54115		Transaction ID : SE.42134 Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/		M M / D D / Y Y Y
Postage		Type		09 16 2021
Name of Federal Candidate:		🗶 Support	Office	Sought: House District: 00
RUBIO, MARCO, , ,		Oppose		President Senate State: FL
Calendar Year-To-Date		555.69	1	rsement For: Primary 🗶 General
Per Election for Office Sought	7 7	000.00	2022	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			. •	158.40
<b>4</b>				
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	М	M / D D / Y Y Y Y
Signature		Date	e 1	1 20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 98 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
The Mail Haus		_ Welle	nem 2	09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Ar	mount
City	State	Zip Code	— I	39.60
De Pere	WI	54115		ransaction ID : SE.42135 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 2021
Name of Federal Candidate:		<b>X</b> Support	Office Sc	ought: X House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Pre	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		185.23	Disburse	ment For: Primary Seneral
	7 7			Other (specify) ▶
Full Name of Payee The Mail Haus		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address				09 20 7 2021
1745 Suburban Drive			Ar	mount
City	State	Zip Code		39.60
De Pere	WI	54115		ransaction ID : SE.42136 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>x</b> Support	Office So	ought:   House District: 05
SCHRADER, KURT, , ,		Oppose	Pre	esident Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	185.23	Disburse 2022	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶	79.20
(I) CURTOTAL of Units arised Index and as Francoline				
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. •	7 7 7 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 –	M = M	/ D D / Y Y Y Y Y
Signature		Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 99 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
The Mail Haus				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Am	ount
City	State	Zip Code	$ \Gamma$	39.60
De Pere	WI	54115		insaction ID : SE.42137 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / 2021
Name of Federal Candidate:		Support	Office Sou	ught: X House District: 08
SCHRIER, KIM DR., , ,		X Oppose	Pres	sident Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	7 7	185.23	Disbursem 2022	nent For:  Primary
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
The Mail Haus		Weine	itom = an	M M / D D / Y Y Y Y
Mailing Address 1745 Suburban Drive				09 20 2021
1745 Gubulban Blive			Am	ount
City	State	Zip Code		39.60
De Pere	WI	54115		ansaction ID : SE.42138 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
SCHUMER, CHARLES E., , ,		<b>✗</b> Oppose	Pres	sident Senate State: NY
Calendar Year-To-Date		185.23	Disbursem 2022	nent For: Primary General
Per Election for Office Sought	7 7		2022	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	·			79.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led1 -	M = M	/ D D / Y Y Y Y
Signature	r	Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 100 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M - M / D - D / Y - Y - Y
Full Name of Payee The Mail Haus		☐ Memo	Item Da	ate of Public Distribution/Dissemination
				09 / 20 / Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Ar	nount
City	State	Zip Code		39.60
De Pere	WI	54115		ransaction ID : SE.42139 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office So	ought:   House District:06
SCHWEIKERT, DAVID S., , ,		Oppose	Pre	esident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		185.23	Disburse 2022	ment For: Primary General
	1		.   _	Other (specify) ▶
Full Name of Payee The Mail Haus		∐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive				09 20 2021
1743 Subulban Drive			Ar	mount
City	State	Zip Code		79.20
De Pere	WI	54115		ransaction ID : SE.42140 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office So	ought: House District: 00
SINEMA, KYRSTEN, , ,		Oppose	Pre	esident State: AZ
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	1481.85	Disburse 2022	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures				118.80
42015-5-1				
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed]	M = M	20 2021
Signature		Date	e 11	20 2021

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 101 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo	Item Date of	of Public Distribution/Dissemination
			N	09 / 20 / Y Y Y Y
Mailing Address 1745 Suburban Drive			Amou	nt
City	State	Zip Code	— I I .	39.60
De Pere	WI	54115		action ID : SE.42141
Purpose of Expenditure Postage		Category/ Type		of Disbursement or Obligation  09 16 2021
Name of Federal Candidate:		O	Office Occupie	t: V House District: 08
SLOTKIN, ELISSA, , ,		Support Oppose	Office Sough	II. A House District.
		х оррозс	Preside	ent Senate State.
Calendar Year-To-Date Per Election for Office Sought	7	185.23	Disbursemen 2022 O	t For: Primary ★ General ther (specify) ►
Full Name of Payee		☐ Memo	1_	of Public Distribution/Dissemination
The Mail Haus			N	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			_   _	09 20 2021
1743 Subulban Drive			Amou	nt
City	State	Zip Code	<b>—</b> Г.	39.60
De Pere	WI	54115	Trans	saction ID : SE.42142 of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	N	09 / 16 / Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	t: K House District: 07
SPANBERGER, ABIGAIL, , ,		<b>x</b> Oppose	Preside	\/A
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	185.23	Disbursemen	t For: Primary <b>✗</b> General ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			<b>.</b>	79.20
(b) SUBTOTAL of Unitemized Independent Expenditure	es		<b>•</b>	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	led] Date	M = M /	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Signature

TEMIZED INDEPENDENT EXPENDITURES			PAGE 102 OF 149
			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee The Mail Haus		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 1745 Suburban Drive			09 20 2021 Amount
City	State	Zip Code	39.60
De Pere	WI	54115	Transaction ID : SE.42143  Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:
STEVENS, HALEY, , ,		X Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	7	185.24	Disbursement For:  Primary  General 2022  Other (specify) ▶
Full Name of Payee The Mail Haus  Mailing Address 4745 Suburbas Drive		☐ Memo	Item Date of Public Distribution/Dissemination
1745 Suburban Drive			Amount
City De Pere	State	Zip Code 54115	39.60  Transaction ID : SE.42144  Date of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type	09 / 16 / Y 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:  House District: 48
STEEL, MICHELLE, , ,		Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	· · · · · ·	185.24	Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
Gross, Jennifer, , ,	[Electronically Fil	<i>led]</i> Date	e 11 20 2021

# SCHEDULE E (FEC Form 3X)

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TEMIZED INDEPENDENT EXPENDITURES					PAGE 103		149
NAME OF COMMITTEE (In Full)				EEC I	FOR LINE 2		
WOMEN SPEAK OUT PAC				To Lot			JEK V
				C	C00530766		الحد
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M	/ D D /	Y	Y
Full Name of Payee		☐ Memo	Item Date	e of Publ	ic Distribution	/Dissemina	ation
The Mail Haus				M M M	/ 20 /	Y Y 202	
Mailing Address 1745 Suburban Drive			Amo	ount			
City	State	Zip Code				39	9.60
De Pere	WI	54115		Transaction ID : SE.42145			
Purpose of Expenditure		0-1	Date	Date of Disbursement or Obligation			
Postage		Category/ Type		09	16	202	
Name of Federal Candidate:		<b>x</b> Support	Office Sou	ight:	<b>X</b> House	District: _	22
TENNEY, CLAUDIA, , ,		Oppose	Pres	sident	Senate	State: _	NY
Calendar Year-To-Date Per Election for Office Sought		185.24	Disbursem 2022		Primary	/ <b>X</b> G	General
Full Name of Payee		☐ Memo	Item Date		ic Distribution	/Dissemin	ation
The Mail Haus		INCo	Item _ =	M M	/ D D /	Y	YY
Mailing Address				09	20	202	21
1745 Suburban Drive			Amo	ount			
City	State	Zip Code				39	0.60
De Pere	WI	54115	Tra	ansaction	ID: SE.4214 ursement or 0	6	
Purpose of Expenditure Postage		Category/ Type		M M M 09	16	202	
Name of Federal Candidate:		<b>✗</b> Support	Office Sou	ıaht:	House	District: _	00
TESTER, JON, , ,		Oppose		sident	<b>✗</b> Senate	State: _	MT
Calendar Year-To-Date			Disbursem	ent For:	Primary	y <b>X</b> G	General
Per Election for Office Sought	<u></u>	185.24	2022	Other (s	pecify) ▶		
				· · · · ·			
(a) SUBTOTAL of Itemized Independent Expenditures			· • [			79.2	20
				-			
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • [				
(c) TOTAL Independent Expenditures							
			, L		7		
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidar party committee) any political party committee or its a	te or authorized						
Gross, Jennifer, , ,	Electronically File	edl Dat	M = M	/ D D		Y Y Y	
Signature		Date	e 11	20	202	21	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 104 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Mail Haus		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Addung				09 20 2021
Mailing Address 1745 Suburban Drive			An	nount
City	State	Zip Code		39.60
De Pere	WI	54115		ransaction ID : SE.42147 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 16 2021
Name of Federal Candidate:		<b>✗</b> Support	Office So	pught: House District: 00
TILLIS, THOM R. SEN., , ,		Oppose		esident Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		370.47	Disburser	ment For: Primary General
	1			Other (specify) ▶
Full Name of Payee The Mail Haus		∐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive			An	nount
City	State	Zip Code	— г	79.20
De Pere	WI	54115		ransaction ID : SE.42148 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>x</b> Support	Office So	ought: House District: 00
TOOMEY, PATRICK JOSEPH, , ,		Oppose	Pre	esident State: PA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	370.46	Disburser 2022	ment For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures				118.80
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	led1 -	M = M	/ D D / Y Y Y Y Y
Signature	omeany I'u	Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 105 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Mail Haus		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive				09 / 20 / 2021
1745 Guburbari Brive			A	mount
City	State	Zip Code		39.60
De Pere	WI	54115		ransaction ID : SE.42149 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: X House District:14
UNDERWOOD, LAUREN, , ,		<b>X</b> Oppose	Pr	esident Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	7	185.24	Disburse 2022	ement For: Primary <b>X</b> General Other (specify) ▶
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y 2021
Mailing Address 1745 Suburban Drive			A	mount
City	State	Zip Code	<u> —</u> г	39.60
De Pere	WI	54115		ransaction ID : SE.42152 ate of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office S	ought: X House District: 21
VALADAO, DAVID, , ,		Oppose	Pr	esident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		185.24	Disburse 2022	ment For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures			, г	79.20
(a) 300101AL of Remized independent Expenditures				73.20
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fi	led]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 11	2021

TEMIZED INDEPENDENT EXPENDITORES				PAGE 106 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1745 Suburban Drive			Amo	
City	State	Zip Code	-	39.60
De Pere	WI	54115		nsaction ID : SE.42153 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / 2021
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 24
VAN DUYNE, ELIZABETH ANN, , ,		Oppose		ident Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	, , ,	185.24	Disburseme 2022	ent For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Mail Haus				M M / D D / Y Y Y Y Y Y O 2021
Mailing Address 1745 Suburban Drive			Amo	nunt
	1			
City De Pere	State	Zip Code	Tra	39.60 nsaction ID : SE.42154
Purpose of Expenditure	WI	54115		of Disbursement or Obligation
Postage		Category/ Type		09 / 16 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sou	ght: X House District: 02
WAGNER, ANN L., , ,		Oppose	Pres	ident Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		185.24	Disburseme	ent For: Primary General
rei Liection foi Office Sought	7 7 -			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			• [	79.20
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed1 -	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	11	20 2021

Signature

## SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 107 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Mail Haus		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1745 Suburban Drive				09 20 2021
			Amo	ount
City	State	Zip Code		118.80
De Pere	WI	54115		nsaction ID : SE.42155 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District:00
WARNOCK, RAPHAEL, , ,		X Oppose		ident State: GA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	555.69	Disbursem 2022	ent For:
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
The Mail Haus				09 / D D / Y Y Y Y Y Y 2021
Mailing Address 1745 Suburban Drive			Amo	ount
City	State	Zip Code	— г	39.60
De Pere	WI	54115	<b>I</b>	Insaction ID : SE.42156 e of Disbursement or Obligation
Purpose of Expenditure Postage		Category/ Type		09 / 16 / 2021
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 07
WILD, SUSAN, , ,		<b>x</b> Oppose	Pres	ident Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	185.24	Disbursem 2022	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures	i		<b>-</b>	158.40
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	ed]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEFENDENT EXPENDITORES	•		PAGE 108 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 21850 Inglewood Ct.			09 20 2021 Amount
City	State	Zin Codo	145.63
City Ashburn	VA	Zip Code 20148	Transaction ID : SE.41909 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09 01 2021
Name of Federal Candidate:		Support	Office Sought:   House District: 32
ALLRED, COLIN, , ,		<b>✗</b> Oppose	President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disbursement For:
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.			09 / 20 / 2021
Mailing Address 21850 Inglewood Ct.			Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41910 Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type	09 / D1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: X House District: 03
AXNE, CINDY, , ,		× Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	<u>, , , , , , , , , , , , , , , , , , , </u>	145.63	Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditure	es		. • 291.26
(b) SUBTOTAL of Unitemized Independent Expendit	ures		
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized	•	• • • • • • • • • • • • • • • • • • • •
Gross, Jennifer, , ,	[Electronically File	ed] Date	e 11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature			

SCHEDULE E (FEC FOIII 3X)	•		
TEMIZED INDEPENDENT EXPENDITURES	5		PAGE 109 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			
_			C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repor	t filed on
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo I	M M / D D / Y Y Y Y
Mailing Address 21850 Inglewood Ct.			09 20 2021 Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41911
		20140	Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09 / 01 / 2021
Name of Federal Candidate:		Support	Office Sought: House District:
AYOTTE, KELLY A, , ,		<b>x</b> Oppose	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disbursement For: ☐ Primary
Full Name of Payee		☐ Memo I	tem Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.			09 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.			09 20 2021
21000 mgiewood ot.			Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41913  Date of Disbursement or Obligation
Purpose of Expenditure		Category/	M M / D D / Y Y Y Y
Mailer Production		Type	09 01 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:   House District: 02
BACON, DONALD J, , ,		Oppose	President Senate State: NE
Calendar Year-To-Date		1 1 1 1 1 1 1	Disbursement For: Primary 🗶 General
Per Election for Office Sought	7 7	145.63	2022
•		'	
(a) SUBTOTAL of Itemized Independent Expenditure	'S		▶ 291.26
(b) SUBTOTAL of Unitemized Independent Expendit	ures		
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	date or authorized	-	
Gross, Jennifer, , ,	[Electronically Fil	ledl -	M = M / D = D / Y = Y = Y
Cianatura	The same and the	Date	11 20 2021

### SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 110 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			-	EC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			l r	
			L	C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y P Y P Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	M	Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amount	9 20 2021
City	State	Zip Code		291.26
Ashburn	VA	20148		ction ID : SE.41918
Purpose of Expenditure Mailer Production	I	Category/ Type	Date of	Disbursement or Obligation  M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District:00
BENNET, MICHAEL F., , ,		X Oppose	Presiden	
Calendar Year-To-Date Per Election for Office Sought	7	291.26	Disbursement I	For: Primary <b>X</b> General er (specify) ▶
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date of	
Mailing Address 21850 Inglewood Ct.			Amount	
City	State	Zip Code		145.63
Ashburn	VA	20148		ction ID : SE.41919 Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type	0	9 01 7 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	₩ House District:05
BICE, STEPHANIE, , ,		Oppose	Presiden	t Senate State: OK
Calendar Year-To-Date Per Election for Office Sought	7 1 7	145.63	Disbursement I	For: Primary <b>✗</b> General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				436.89
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>•</b>	7
(c) TOTAL Independent Expenditures			<b>•</b>	7 1 7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Gross, Jennifer, , ,	[Electronically Fil	led] Date		20 2021

Date

### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES PAGE 111 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee Tradewinds Consulting, Inc. 20 2021 Mailing Address 21850 Inglewood Ct. Amount City State Zip Code 145.63 Ashburn 20148 Transaction ID: SE.41921 VA Date of Disbursement or Obligation Purpose of Expenditure Category/ Mailer Production 09 01 2021 Type Name of Federal Candidate: Support Office Sought: House District: BIDEN, JOSEPH R JR, , , Oppose x President Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 145.63 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Tradewinds Consulting, Inc. 2021 20 09 Mailing Address 21850 Inglewood Ct. Amount 145.63 City State Zip Code Ashburn Transaction ID: SE.41922 VA 20148 Date of Disbursement or Obligation Purpose of Expenditure Category/ Mailer Production 01 2021 09 Type Name of Federal Candidate: 03 x Support Office Sought: **X** House District: BOEBERT, LAUREN, , , CO Oppose President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 145.63 2022 Per Election for Office Sought Other (specify) ▶ 291.26 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC

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Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report						
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item	Date of Public Distribution/Dissemination		
Mailing Address 21850 Inglewood Ct.		09 20 7 2021				
21030 inglewedd Ot.				Amount		
City	State	Zip Code		145.63		
Ashburn	VA	20148		Transaction ID : SE.41923 Date of Disbursement or Obligation		
Purpose of Expenditure Mail Production		Category/ Type		09 01 / 2021		
Name of Federal Candidate:		Support	Office	e Sought:  Mouse District: 07		
BOURDEAUX, CAROLYN, , ,		<b>x</b> Oppose		President Senate State: GA		
Calendar Year-To-Date Per Election for Office Sought	2	145.63	Disbu 2022	ursement For: Primary General		
Full Name of Payee		Memo	Itom	Date of Public Distribution/Dissemination		
Tradewinds Consulting, Inc.		□ Memo	item	09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 21850 Inglewood Ct.				Amount		
City	State	Zip Code		145.63		
Ashburn	Ashburn VA 20148			Transaction ID : SE.41925 Date of Disbursement or Obligation		
Purpose of Expenditure Mailer Production		Category/ Type		09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		<b>✗</b> Support	Office	e Sought: House District: 00		
BURR, RICHARD M, , ,		Oppose		President Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought	7 1 7	145.63	Disbu 2022	orsement For:		
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	291.26		
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•			
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Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		• • • • • • • • • • • • • • • • • • • •		
Gross, Jennifer, , ,	[Electronically Fil	ed]	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature		_ Date	9 1	1 20 2021		
				FEC Schedule E (Form 3X) Rev. 05/2016		

	PAGE 1	13 OF 149
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Tradewinds Consulting, Inc.  Mailing Address 21850 Inglewood Ct.  City State Zip Code 145.63  Ashburn VA 20148 Transaction ID: SE.41927  Date of Disbursement or Otiligation  Name of Federal Candidate: Support Office Sought Sought 145.63  Disbursement For: Primary IX General 2022 Other (specify)   Transaction ID: SE.41927  Date of Disbursement or Otiligation  Disbursement For: Primary IX General 2022 Other (specify)   Transaction ID: SE.41927  Date of Disbursement For: Primary IX General 2022 Other (specify)   Transaction ID: SE.41927  Date of Disbursement For: Primary IX General 2022 Other (specify)   Date of Public Distribution/Dissemination  Tradewinds Consulting, Inc.  City Other (specify)   Name of Federal Candidate: IX Support Office Sought Transaction ID: SE.41928  Date of Disbursement or Otiligation  Transaction ID: SE.41927  Date of Disbursement or Otiligation  Date of Disbursement or Otiligation  Date of Disbursement or Otiligation  Transaction ID: SE.41927  Date of Disbursement or Otiligation  Transaction ID: SE.41927  Date of Disbursement or Otiligation  Transaction ID: SE.41927  Date of Disbursement For: Primary IX General Date of Disbursement or Otiligation  Transaction ID: SE.41927  Date of Disbursement For: Primary IX General Date of Disbursement For: Primary IX General Date of Disbursement For: Primary IX General Date of Disbursement For: Pr	Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M / D D / Y T Y T Y	
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Amount	Tradewinds Consulting, Inc.					
City Ashburn  Purpose of Expenditure Maller Production  Name of Federal Candidate: BUSTOS, CHERL,  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee  Transaction ID: SE.41927 Date of Disbursement or Obligation  Transaction ID: SE.41927 Date of Disbursement For:  Calendar Year-To-Date Per Election for Office Sought  Transaction ID: SE.41929 Date of Public Distribution/Dissemination  Tradewinds Consulting, Inc.  Malling Address 21850 Inglewood Ct.  City Ashburn  Purpose of Expenditure Maller Production  Name of Federal Candidate:  CARTER, JOHN R. REP.,  CARTER, JOHN R. REP.,  CARTER, JOHN R. REP.,  CARTER, JOHN R. REP.,  Calendar Year-To-Date Per Election for Office Sought  Transaction ID: SE.41929 Date of Disbursement or Obligation  Transaction ID: SE.41929 Date of Disbursement or Obligation  Transaction ID: SE.41929 Date of Disbursement or Disburs	Mailing Address 21950 Inglowed Ct				09 20 2021	
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Purpose of Expenditure Mailer Production  Name of Federal Candidate: BUSTOS, CHERI  Calendar Year-To-Date Per Election for Office Sought  Full Name of Payee  Tradewinds Consulting, Inc.  Mailing Address 21850 Inglewood Ct.  City Ashburn  Purpose of Expenditure Mailer Production  Name of Federal Candidate:  City Ashburn  VA 20148  Purpose of Expenditure Mailer Production  Name of Federal Candidate:  City Ashburn  VA 20148  Purpose of Expenditure Mailer Production  Name of Federal Candidate:  Cartegory/ Name of Federal Candidate:  CARTER, JOHN R. REP,  Calendar Year-To-Date Per Election for Office Sought  Id-So Transaction ID: SE-41929 Date of Disbursement or Obligation  Transaction ID: SE-41929 Date of Disbursement or Obligation  VA 20148  Disbursement For:  Amount  Transaction ID: SE-41929 Date of Disbursement or Obligation  VA 20148  Disbursement For:  Oppose  Transaction ID: SE-41929 Date of Disbursement or Obligation  VA 2021  Name of Federal Candidate:  CARTER, JOHN R. REP,  Calendar Year-To-Date Per Election for Office Sought  Id-So  Oppose  Transaction ID: SE-41929 Date of Disbursement or Obligation  VA 2021  Other (specify) Inc.  VA 20148  Disbursement For:  Oppose  President Senate State:  TX  Calendar Year-To-Date Per Election for Office Sought  Id-So  Other (specify) Inc.  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Cross, Jennifer  Date of Disbursement or Obligation  Transaction ID: SE-41929 Date of Disbursement or Obligation  Transaction ID: SE-41928 Date of Disbursement or Obligation  Transaction ID: SE-41	City	State	Zip Code		145.63	
Name of Federal Candidate:    Support   Office Sought:   House   District: 17   Sustance   Sustanc	Ashburn	VA	20148			
BUSTOS, CHERI,				] [		
BUSTOS, CHERI,	Name of Federal Candidate:		Support	Office Soug	ht: X House District: 17	
Calendar Year-To-Date Per Election for Office Sought    State   Zip Code   Transaction   Disbursement For:   Primary   X General	BUSTOS, CHERI, , ,					
Per Election for Office Sought  Full Name of Payee Tradewinds Consulting, Inc.  Mailing Address 21850 Inglewood Ct.  City State Zip Code VA 20148  Purpose of Expenditure Mailer Production Mailer Production Name of Federal Candidate: CARTER, JOHN R. REP, Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.    Other (specify)   Date	Calandar Voor To Data					
Tradewinds Consulting, Inc.  Mailing Address 21850 Inglewood Ct.  City Ashburn VA 20148  Purpose of Expenditure Mailer Production  Name of Federal Candidate: CARTER, JOHN R. REP., ,,  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.    Mailing Address   Amount			145.63	2022		
Mailing Address 21850 Inglewood Ct.    Amount			☐ Memo	Item Date	of Public Distribution/Dissemination	
Mailing Address  21850 Inglewood Ct.  City  Ashburn  VA  20148  Purpose of Expenditure  Mailer Production  Name of Federal Candidate:  CARTER, JOHN R. REP.,	Tradewinds Consulting, Inc.					
City State Zip Code VA 20148  Purpose of Expenditure Mailer Production  Purpose of Expenditure Mailer Production  Name of Federal Candidate:  CARTER, JOHN R. REP.,,  Calendar Year-To-Date Per Election for Office Sought  Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  [Electronically Filed]	Mailing Address 21850 Inglewood Ct				20 2021	
Ashburn  VA  20148  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mailer Production  Name of Federal Candidate:  CARTER, JOHN R. REP., , Oppose  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  (b) SUBTOTAL of Unitemized Independent Expenditures  (c) TOTAL Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  ITransaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: SE.41929 Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: Sea / Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: Sea / Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: Sea / Date of Disbursement or Obligation  Transaction ID: Sea / Date of Disbursement or Obligation  Mog / D1 / 2021  Transaction ID: Sea / Date of Disbursement or Obligation  Transaction ID: Sea / Date of Disbursement or Obligation  Transaction ID: Sea / Date of Disbursement or Obligation  Transaction ID: Sea / Date of Disbursement or Obligation  Transaction ID: Sea / Date of Disbursement or O	21000 mgicwood ot.			Amou	unt	
Purpose of Expenditure Mailer Production  Category/ Type  Oppose  Oppose  President  Senate  State: TX  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures  Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Date  Office Sought:  W House District: 31 Disbursement For: Primary  Oppose  Disbursement For: Primary  Oppose  Other (specify)  Disbursement For: Oppose Office Sought  Disbursement For: Type  Oppose Office Sought: House District: 31 Disbursement For: Oppose Oppose Oppose Oppose Office Sought: House District: 31 Disbursement For: Type Oppose Op	City	State	Zip Code	— I [ ]	145.63	
Mailer Production    Category   Type		VA	20148			
CARTER, JOHN R. REP., , ,						
CARTER, JOHN R. REP., ,   Oppose   President   Senate   State:   TX    Calendar Year-To-Date   Primary   General   2022   Other (specify)   Calendar Year-To-Date   Other (specify)   Primary   General   2022   Other (specify)   Calendar Year-To-Date   Other (specify)   Calendar Year	Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: X House District: 31	
Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures	CARTER, JOHN R. REP., , ,		Oppose			
(a) SUBTOTAL of Itemized Independent Expenditures		· · · · ·	145.63	2022		
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Gross, Jennifer, , ,   [Electronically Filed]  Date  Date  M. M	(a) SUBTOTAL of Itemized Independent Expenditures			· •	291.26	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Gross, Jennifer, , ,   [Electronically Filed]  Date  Date  Date	(b) SUBTOTAL of Unitemized Independent Expenditure	res		· [		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.  Gross, Jennifer, , ,   [Electronically Filed]  Date  Date  Date						
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.   Gross, Jennifer, , ,   [Electronically Filed]  Date  Date	(c) TOTAL Independent Expenditures			· •	9 9 9	
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TEMIZED INDEPENDENT EXPENDITURES			PAGE 114 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
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Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo I	tem Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41931 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09 / 01 / 2021
Name of Federal Candidate:		Support	Office Sought:  M House District: 08
CARTWRIGHT, MATTHEW A., , ,		x Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disbursement For: ☐ Primary
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo I	tem Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amount
City Ashburn	State VA	Zip Code 20148	Transaction ID : SE.41933 Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:  House District: 06
CASTEN, SEAN, , ,		<b>x</b> Oppose	President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	145.63	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures			291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
Gross, Jennifer, , ,	Electronically Fil	ded] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Gross, Jennifer, , ,

Signature

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SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES	5			PAGE 115 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New rep	port Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date	e of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 20 7 2021
Mailing Address 21850 Inglewood Ct.			Amo	punt
City	State	Zip Code		291.26
Ashburn	VA	20148		nsaction ID : SE.41935 e of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
CORTEZ MASTO, CATHERINE, , ,		x Oppose		ident Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	291.26	Disbursement 2022	ent For: Primary <b>X</b> General Other (specify) ▶
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.			Amo	punt
City	State	Zip Code	— F	145.63
Ashburn	VA	20148		insaction ID : SE.41937 e of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 / 01 / 2021
Name of Federal Candidate:		Support	Office Sou	ght: 🗶 House District:02
CRAIG, ANGELA DAWN, , ,		<b>x</b> Oppose		ident Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	145.63	Disbursement 2022	ent For: Primary <b>X</b> General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	S		<b>•</b>	436.89
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		• <u></u>	7
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorize	•		

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Date

TEMIZED INDEPENDENT EXPENDITURES			PAGE 116 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	t filed on M M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo It	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.			Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41939 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09 01 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:   House District: 13
CRIST, CHARLIE JOSEPH, , ,		<b>x</b> Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	<b>7</b> 1 1 <b>7</b>	145.63	Disbursement For:
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo It	Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41941  Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:  House District:03
DAVIDS, SHARICE, , ,		<b>x</b> Oppose	President Senate State: KS
Calendar Year-To-Date Per Election for Office Sought	<u>, , , , , , , , , , , , , , , , , , , </u>	145.63	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures			291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>•</b>
(c) TOTAL Independent Expenditures			<b>•</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	• • • • • • • • • • • • • • • • • • • •
Gross, Jennifer, , ,	Electronically Fil	ed] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 117 OF 149
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOWEN SPEAK OUT FAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.				Amount
City	State	Zip Code		145.63
Ashburn	VA	20148		Transaction ID : SE.41943 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office	Sought:   House District: 04
DEFAZIO, PETER A, , ,		Oppose		President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disbu 2022	rsement For:
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.				Amount
City	State	Zip Code		145.63
Ashburn	VA	20148		Transaction ID : SE.41945 Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 / 01 / 2021
Name of Federal Candidate:		Support	Office	Sought: K House District: 19
DELGADO, ANTONIO, , ,		<b>x</b> Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	145.63	Disbu 2022	resement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		. •	291.26
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	[ed] Date	e 1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 118 OF 149
NAME OF COMMITTEE (In Fall)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOMEN OF LAR OUT FAC				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amo	09 20 2021 ount
City	State	Zip Code	— F	145.63
Ashburn	VA	20148		nsaction ID : SE.41947 of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		M 09 / D D / Y Y Y Y Y Y 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sou	ght:   House District: 07
FISCHBACH, MICHELLE, , ,		Oppose	Presi	dent Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	, , ,	145.63	Disburseme 2022	ent For:
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amo	unt
City Ashburn	State VA	Zip Code 20148	II.	nsaction ID : SE.41949 of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: K House District:07
FLETCHER, ELIZABETH, , ,		<b>x</b> Oppose	Presi	dent Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disburseme 2022	ent For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures			, L	291.26
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· ·	7 7 7
(c) TOTAL Independent Expenditures			· [	7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		·
Gross, Jennifer, , ,	[Electronically Fil	led] Date	e 11	20 / 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 119 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo		of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amour	09 20 2021
			Allioui	
City	State	Zip Code		145.63
Ashburn	VA	20148		action ID : SE.41950 of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 2021
Name of Federal Candidate:		Support	Office Sough	t: K House District: 03
GARAMENDI, JOHN, , ,		× Oppose	Preside	C^
Calendar Year-To-Date			Disbursemen	
Per Election for Office Sought	, , ,	145.63	2022	ther (specify) ▶
Full Name of Payee		Memo	1 _	of Public Distribution/Dissemination
Tradewinds Consulting, Inc.			M	M / D D / Y Y Y Y
Mailing Address 24950 Inglowed Ct			— L	09 20 2021
21850 Inglewood Ct.			Amour	nt
City	State	Zip Code		145.63
Ashburn	VA	20148	Trans	saction ID : SE.41952
Purpose of Expenditure		Category/		of Disbursement or Obligation
Mailer Production		Type	_  L	09 01 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	t: X House District: 02
GARBARINO, ANDREW, , ,		Oppose	Preside	NV
Calendar Year-To-Date		445.00	Disbursemen	t For: Primary General
Per Election for Office Sought	7-1-1-7	145.63	<sup>2022</sup>	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		<b>•</b>	
(c) TOTAL Independent Expenditures				
(c) TOTAL macpendent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	[ed] Date	M = M /	20 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y

TEMIZED INDEPENDENT EXPENDITURES					PAGE 12	
NAME OF COMMITTEE (In Full)				<del></del>		24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC ID	ENTIFICAT	TION NUMBER ▼
WOMEN OF EARL OUT TAKE				C	C0053076	6
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M /	D   D /	Y Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date	M = M /	D D	n/Dissemination
Mailing Address 21850 Inglewood Ct.				09	20	2021
			Amou	ınt		
City	State	Zip Code				145.63
Ashburn	VA	20148			D: SE.4195 rsement or	
Purpose of Expenditure Mailer Production		Category/ Type		09	01	2021
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht:	<b>₹</b> House	District: 25
GARCIA, MICHAEL, , ,		Oppose	Presid	_	Senate	State: CA
Calendar Year-To-Date			Disburseme		Prima	
Per Election for Office Sought	7	145.63	2022	Other (sp		y Contoral
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date	of Public	Distribution	n/Dissemination
Tradewinds Consulting, Inc.				M M /	20	2021
Mailing Address 21850 Inglewood Ct.			Amou	unt		
City	State	Zip Code	-			145.63
Ashburn	VA	20148	Tran	saction	D: SE.419	56
Purpose of Expenditure  Mailer Production		Category/ Type		M M /	01	2021
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht:	House	District:26
GIMENEZ, CARLOS, , ,		Oppose	Presid		Senate	State: FL
Calendar Year-To-Date		145.00	Disburseme	nt For:	Prima	ry 🗶 General
Per Election for Office Sought	7 7	145.63	2022	Other (sp	ecify) ▶	
						1 10000
(a) SUBTOTAL of Itemized Independent Expenditures			· •	7		291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· [	7		
(c) TOTAL Independent Expenditures			· • [			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized					
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M = M /	D = D		17 Y Y
	Eccuonically I'll	Date	11	20	20	)21

TEMIZED INDEPENDENT EXPENDITURES					PAGE 12	
NAME OF COMMITTEE (In Full)						24 OF FORM 3X
WOMEN SPEAK OUT PAC						TON NUMBER ▼
				C	C0053076	6
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	1 = M /	D D /	Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo		of Public	Distribution	n/Dissemination
Mailing Address 21850 Inglewood Ct.				09	20	2021
			Amou	ınt		
City	State	Zip Code				145.63
Ashburn	VA	20148			D: SE.4195 rsement or	
Purpose of Expenditure Mailer Production		Category/ Type		M M M 09	01	2021
Name of Federal Candidate:		Support	Office Soug	ht:	<b>X</b> House	District: 02
GOLDEN, JARED, , ,		Coppose Suppose	Presid	_	Senate	State: ME
Colondon Voca To Doto			Disburseme		Prima	
Calendar Year-To-Date Per Election for Office Sought		145.63	2022	Other (sp		Je General
Full Name of Payee		☐ Memo	Item Date	of Public	Distribution	n/Dissemination
Tradewinds Consulting, Inc.			Г	M M M	20	2021
Mailing Address 21850 Inglewood Ct.			Amou		20	2021
	_		Alliot			
City	State	Zip Code				
Ashburn	VA	20148			ID: SE.419 rsement or	
Purpose of Expenditure  Mailer Production		Category/ Type		09	01	2021
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht:	K House	District: 23
GONZALES, ERNEST ANTHONY TONY, , , II		Oppose	Presid	_	Senate	State: TX
Calendar Year-To-Date			Disburseme	nt For:	Prima	
Per Election for Office Sought	7	145.63	2022 —	Other (sp		
			_			
(a) SUBTOTAL of Itemized Independent Expenditures			· <b></b>			291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	7		
(c) TOTAL Independent Expenditures						
(c) 10 1AE maopondoni Expondidado				7		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized					
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M = M /	20		Y Y Y
<u></u>		_ Date	9 11	20	20	)21

SCHEDULE E (FEC FORM 3X) TEMIZED INDEPENDENT EXPENDITURES	;			PAGE 122 OF 149
NAME OF COMMITTEE (I. F.II)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
VOMEN OF EARL OOT FAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	n M = M / D = D / Y = Y = Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item [	Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			,	09 20 2021 Amount
City	State	Zip Code		145.63
Ashburn	VA	20148		Transaction ID : SE.41962 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 / 2021
Name of Federal Candidate:		Support	Office S	Sought: X House District: 15
GONZALEZ, VICENTE, , ,		<b>✗</b> Oppose	F	President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7 7	145.63	Disburs 2022	ement For: ☐ Primary <b>X</b> General Other (specify) ▶
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item [	Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			,	Amount
City Ashburn	State VA	Zip Code 20148		145.63 Transaction ID : SE.41964
Purpose of Expenditure Mailer Production		Category/ Type		Date of Disbursement or Obligation  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office S	Sought: House District: 05
GOOD, ROBERT G., , ,		Oppose	F	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 7	145.63	Disburs 2022	ement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	3		• [	291.26
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	ded] Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 123 OF 149
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	DENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			С	C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	M M M	ublic Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amount	20 2021
City	State	Zip Code		145.63
Ashburn	VA	20148		on ID : SE.41966 sbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09	
Name of Federal Candidate:		Support	Office Sought:	<b>✗</b> House District:05
GOTTHEIMER, JOSH, , ,		<b>x</b> Oppose	President	Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	, , ,	145.63	Disbursement Fo 2022 Other	r: Primary <b>X</b> General (specify) ▶
Full Name of Payee Tradewinds Consulting, Inc.  Mailing Address 21850 Inglewood Ct.		☐ Memo	Item Date of Pu	ublic Distribution/Dissemination
	To: .	7: 0 !		400.00
City Ashburn	State VA	Zip Code 20148		436.89 on ID : SE.41968 sbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type	Date of Di	
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	House District:00
GRASSLEY, CHARLES E, , ,		Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	1	436.89	Disbursement Fo 2022 Other	r: Primary <b>X</b> General (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure				582.52
(c) TOTAL Independent Expenditures			<b>•</b>	9 1 4 1 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	ded] Date	M M / D	

NAME OF COMMITTEE (In Full)

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 124 OF 149 FOR LINE 24 OF FORM 3X						
FEC	_	TION NUMBER ▼				
C C00530766						
M = M	/ D D	/ Y Y Y Y				
of Dub	olio Diotributio	on/Dissemination				
M M		/ Y Y Y Y Y				
09	20	2021				
ount						
		291.26				
nsactio	n ID : SE.419	70				
of Disl	bursement or	Obligation				
09	01	2021				
aht:	Llaures	Diatriat: 00				
ght:		NH				
ident	<b>✗</b> Senate					
ent For:	Prima	ary <b>X</b> General				
	specify) ▶ _					
e of Pub		on/Dissemination				
M 09	20	2021				
ount						
		145 63				
		145.63				
insactio	n ID : SE.419 bursement or	972 Obligation				
nsactio	n ID : SE.419	972 Obligation				
nsactio e of Disl	on ID : SE.419 bursement or	772 Obligation				
nsactio e of Disl M 09	n ID : SE.419 bursement or	ODDIgation  Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
nsactio e of Disl M 09 ght:	n ID : SE.419 bursement or  / D1  * House  Senate	Obligation  District: 02  State: NM				
nsactio of Disl M 09 ght: ident ent For:	n ID : SE.419 bursement or  / D 01  X House  Senate	Obligation  District: 02  State: NM				
ght: ident ent For:	n ID : SE.419 bursement or  / D1  * House  Senate	Obligation  District: 02  State: NM				
nsactio of Disl M 09 ght: ident ent For:	n ID : SE.419 bursement or  / D 01  X House  Senate	Obligation  District: 02 State: NM  General				
nsactio of Disl M 09 ght: ident ent For: Other (	n ID : SE.419 bursement or  / D 01  X House  Senate	Obligation  District: 02  State: NM				
nsactio e of Disl M 09 ght: ident ent For:	n ID : SE.419 bursement or  / D1  X House  Senate  Prima specify) ▶	Obligation  District: 02 State: NM  General				
ght: ident  Other (	n ID : SE.419 bursement or  / D1  X House  Senate  Prima specify) ▶	Obligation  District: 02 State: NM  General				
ght: ident ent For: Other (	n ID : SE.419 bursement or  / 01  X House Senate Prima specify)	District: 02 State: NM General				

WOMEN SPEAK OUT PAC Check if 24-hour report 48-hour report New report Amends report filed on Date Full Name of Payee Tradewinds Consulting, Inc. Mailing Address 21850 Inglewood Ct. Am City State Zip Code VA 20148 Tra Ashburn Date Purpose of Expenditure Category/ Mailer Production Type Name of Federal Candidate: Office Sou Support HASSAN, MARGARET WOOD, , , Oppose Pres Disbursem Calendar Year-To-Date 436.89 2022 Per Election for Office Sought Full Name of Payee Date Memo Item Tradewinds Consulting, Inc. Mailing Address 21850 Inglewood Ct. Amo City State Zip Code Ashburn Tra VA 20148 Date Purpose of Expenditure Category/ Mailer Production Type Name of Federal Candidate: x Support Office Sou HERRELL, STELLA YVETTE, , , Oppose Pres Calendar Year-To-Date Disbursem 145.63 2022 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date Signature FEC Schedule E (Form 3X) Rev. 05/2016

TEMIZED INDEPENDENT EXPENDITURES			PAGE 125 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo It	Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  09 20 2021
Mailing Address 21850 Inglewood Ct.			Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41974 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:  House District: 01
ARENHOLZ, ASHLEY HINSON, , ,		Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7 1 7		Disbursement For: ☐ Primary
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo It	Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41976  Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type	09 / 01 / Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:
HORSFORD, STEVEN ALEXZANDER, , ,		<b>x</b> Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 7	445.00	Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures			291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>&gt;</b>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	· · · · · · · · · · · · · · · · · · ·
Gross, Jennifer, , ,	Electronically Fil	ed] Date	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITORES				PAGE 126 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.			A	mount
City	State	Zip Code		145.63
Ashburn	VA	20148		ransaction ID : SE.41978 ate of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 / 01 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office S	ought: X House District: 08
HUDSON, RICHARD L. JR., , ,		Oppose		esident Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	7 1 7	145.63	Disburse 2022	ement For:
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				M M / D D / Y Y Y Y Y Y O 2021
Mailing Address 21850 Inglewood Ct.			Δ	mount
	T-	I		
City Ashburn	State	Zip Code		436.89 Transaction ID : SE.41980
Purpose of Expenditure	VA	20148		ate of Disbursement or Obligation
Mailer Production		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office S	ought: House District: 00
JOHNSON, RON HAROLD MR., , ,		Oppose	Pr	esident Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		436.89	Disburse	ement For: Primary Seneral
To Elocation for Called Coagni	1 1			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				582.52
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures			• •	7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	2	Date	9 11	20 2021

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 127 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOMEN OF EARL OOF TAKE				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Am	09 20 2021 nount
Oth	04-4-	7: 01-	— г	700.40
City	State	Zip Code	1 L	728.16
Ashburn	VA	20148		ansaction ID : SE.41982 te of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 7 2021
Name of Federal Candidate:		Support	Office So	ught: House District: 00
KELLY, MARK, , ,		Coppose Suppose		sident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	728.16	Disburser 2022	nent For:
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Da	te of Public Distribution/Dissemination
				09 20 2021
Mailing Address 21850 Inglewood Ct.			Am	nount
	T-: :	T =	— г	44500
City	State	Zip Code		145.63
Ashburn	VA	20148		ansaction ID : SE.41985 te of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 / 01 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office So	ught: X House District: 39
KIM, YOUNG, , ,		Oppose		sident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	,	145.63	Disburser 2022	nent For: Primary   General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	873.79
(b) SUBTOTAL of Unitemized Independent Expenditure	′es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M = M	/ DD

TEMIZED INDEPENDENT EXPENDITURES				PAGE 128 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOMEN OF LAR OUT TAO				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo		of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amou	09 20 2021 nt
Oth	04-4-	7: 01-		445.00
City	State	Zip Code	نسل ا	145.63
Ashburn	VA	20148		saction ID : SE.41986 of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 2021
Name of Federal Candidate:		Support	Office Sough	nt: X House District: 03
KIND, RONALD JAMES, , ,		x Oppose	Presid	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Calendar Year-To-Date Per Election for Office Sought	7 7	145.63	Disbursemer 2022	nt For: Primary <b>X</b> General Other (specify) ▶
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	_	of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amou	nt
City	State	Zip Code		145.63
Ashburn	VA	20148	Trans	saction ID : SE.41988 of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 01 2021
Name of Federal Candidate:		Support	Office Sough	nt: Nouse District: 17
LAMB, CONOR, , ,		X Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	145.63	Disbursemer 2022	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			· [	291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>•</b>	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed]	M = M /	20 / 2021

TEMIZED INDEPENDENT EXPENDITURES	S				PAGE 129 OF 149
NAME OF COMMITTEE (In Full)					FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC	IDENTIFICATION NUMBER ▼
				C	C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed or	M = M	/ D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item [	Date of Pub	olic Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			A	Amount	20 2021
City	State	Zip Code			145.63
Ashburn	VA	20148			n ID : SE.41990 oursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		M M M	/ D D / Y Y Y Y Y Y 2021
Name of Federal Candidate:		Support	Office S	Sonapt.	House District:00
LAXALT, ADAM, , ,		Capport Oppose		resident	Senate State: CO
		<b>7</b> Spp. 33			
Calendar Year-To-Date Per Election for Office Sought	7	436.89	2022	ement For: Other (	Primary ✗ General
Full Name of Payee		Memo	Item [		olic Distribution/Dissemination
Tradewinds Consulting, Inc.				M = M	/ D D / Y Y Y Y
Mailing Address 24850 Inglowed Ct				09	20 2021
21850 Inglewood Ct.			A	Amount	
City	State	Zip Code			145.63
Ashburn	VA	20148		Transactio	n ID : SE.41992 oursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09	01 / 2021
Name of Federal Candidate:		Support	Office S	Sought:	₩ House District:03
LEE, SUSIE, , ,		<b>x</b> Oppose	P	resident	Senate State: NV
Calendar Year-To-Date		145.62		ement For:	Primary Seneral
Per Election for Office Sought	7 7	145.63	2022	Other (	specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	9S		• [		291.26
(b) SUBTOTAL of Unitemized Independent Expendit	tures		•	,	
(c) TOTAL Independent Expenditures			•	,	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candi- party committee) any political party committee or it	date or authorized	•			
Gross, Jennifer, , ,	[Electronically Fil	<i>led]</i> Date	M = M 11	/ D	2021
Cianaturo	<u> </u>	_ Date	, <u>' ' '</u>		2021

TEMIZED INDEPENDENT EXPENDITURES					PAGE 13	
NAME OF COMMITTEE (In Full)						24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC ID	ENTIFICAT	TON NUMBER ▼
WOMEN OF EARL OUT TAKE				C	C0053076	6
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M /	D D /	Y   Y   Y   Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	_	of Public	D D	n/Dissemination
Mailing Address 21850 Inglewood Ct.				09	20	2021
			Amou	ınt		
City	State	Zip Code		1 (0)		145.63
Ashburn	VA	20148			D: SE.4199 rsement or	
Purpose of Expenditure Mailer Production		Category/ Type		09	01	2021
Name of Federal Candidate:		Support	Office Sough	ht:	<b>X</b> House	District: 49
LEVIN, MIKE, , ,		x Oppose	Presid	_	Senate	State: CA
Calendar Year-To-Date			Disbursemer		Prima	
Per Election for Office Sought	-	145.63	2022	Other (sp	ecify) ►	<i>,</i>
Full Name of Payee		☐ Memo	Item Date	of Public	Distribution	n/Dissemination
Tradewinds Consulting, Inc.			I P	M M /	20	/ Y Y Y Y Y Y 2021
Mailing Address 21850 Inglewood Ct.				09	20	2021
			Amou	ınt		
City	State	Zip Code				145.63
Ashburn	VA	20148			ID: SE.419 rsement or	
Purpose of Expenditure  Mailer Production		Category/ Type		09	01	2021
Name of Federal Candidate:		Support	Office Sough	ht:	House	District:02
LURIA, ELAINE, , ,		<b>x</b> Oppose	Presid	_	Senate	State: VA
Calendar Year-To-Date		1 111111	Disbursemer	nt For:	Prima	ry 🗶 General
Per Election for Office Sought	T T	145.63	2022	Other (sp	ecify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures			· • [			291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· ·	7		
(c) TOTAL Independent Expenditures						
(c) 10 M2 maoponaoni Exponentiaco				7	1 1	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized					
Gross, Jennifer, , ,	Electronically Fil	ed1	M = M /	D D		YYY
- L	ъссиони <i>ш</i> иу Г и	Date	9 11	20	20	)21

TEMIZED INDEPENDENT EXPENDITURES			PAGE 131 OF 149
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼
WOMEN OF LAR OUT FAC			C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 21850 Inglewood Ct.			09 20 2021 Amount
City	State	Zip Code	145.63
Ashburn	VA	20148	Transaction ID : SE.41999 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	M 09 / D D / Y Y Y Y Y Y 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:
MACE, NANCY, , ,		Oppose	President Senate State: SC
Calendar Year-To-Date Per Election for Office Sought	, , ,	145.63	Disbursement For:  Primary
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			Amount
City Ashburn	State VA	Zip Code 20148	Transaction ID : SE.42001 Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:  House District: 07
MALINOWSKI, TOM, , ,		X Oppose	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disbursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	5		291.26
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>&gt;</b>
(c) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized		
Gross, Jennifer, , ,	[Electronically Fil	ded] Date	e 11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Gross, Jennifer, , ,

Signature

# SO

CHEDULE E (FEC Form 3X)				
EMIZED INDEPENDENT EXPENDITURES	1			PAGE 132 OF 149
AME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
heck if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.			Amou	nt
City	State	Zip Code		145.63
Ashburn	VA	20148		saction ID : SE.42003 of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	nt: K House District: 11
MALLIOTAKIS, NICOLE, , ,		Oppose	Presid	ent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7 7	145.63	Disbursemer	nt For: Primary <b>X</b> General Other (specify) ▶
Full Name of Payee		Memo		of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.			Amou	nt
City	State	Zip Code		291.26
Ashburn	VA	20148		saction ID : SE.42005 of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 / 01 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	nt: House District: 00
MANCHIN III, JOE, , ,		Oppose	Presid	ent 🗷 Senate State: WV
Calendar Year-To-Date Per Election for Office Sought	7	291.26	Disbursemer 2022	nt For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	3		<b>•</b>	436.89
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres			
			·	7
(c) TOTAL Independent Expenditures			<b>•</b>	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorize	•		· · · · · · · · · · · · · · · · · · ·

[Electronically Filed]

2021

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Date

NAME OF COMMITTEE (In Full)

Full Name of Payee

Purpose of Expenditure Mailer Production

Name of Federal Candidate:

Mailing Address

Check if

City

Ashburn

WOMEN SPEAK OUT PAC

24-hour report

Tradewinds Consulting, Inc.

21850 Inglewood Ct.

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

48-hour report

State

			PAGE 133 OF 149
			FOR LINE 24 OF FORM 3.
			FEC IDENTIFICATION NUMBER
			C C00530766
New repo	ort Amends rep	ort filed o	on Man / Dab / Yayayay
	☐ Memo	Item	Date of Public Distribution/Dissemination
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			Amount
	Zip Code		145.63
VA	20148		Transaction ID : SE.42006 Date of Disbursement or Obligation
	Category/ Type		09
	<b>X</b> Support	Office	Sought: House District: 00
	Oppose		President Senate State: AZ
	873.79	Disbur	sement For: Primary <b>X</b> Genera  Other (specify) ▶
		Item	Date of Public Distribution/Dissemination
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	_		M 09 / 20 / Y 2021 Amount
VA	☐ Memo		M 09 / 20 / Y 2021  Amount  145.63  Transaction ID: SE.42007
VA	Zip Code 20148		M 09 / 20 / Y 2021 Y Amount 145.63
VA	Zip Code		Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation
VA	Zip Code 20148  Category/		Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation
VA	Zip Code 20148  Category/ Type	Office	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  99  100  100  100  100  100  100  100
VA	Zip Code 20148  Category/ Type  Support	Office	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
VA	Zip Code 20148  Category/ Type  X Support  Oppose	Office Disburs	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  909  101  Sought: House District: 02  President Senate State: IA
/A	Zip Code 20148  Category/ Type  X Support  Oppose	Office Disburs	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  M M O9 O1 O2 O21  Sought:  House District: 02  President Senate State: IA  Sement For:  Primary  General  Other (specify)
VA	Zip Code 20148  Category/ Type  X Support  Oppose	Office Disburs	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
VA	Zip Code 20148  Category/ Type  X Support  Oppose	Office Disburs	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  M M O9 O1 O2 O21  Sought:  House District: 02  President Senate State: IA  Sement For:  Primary  General  Other (specify)
VA	Zip Code 20148  Category/ Type  X Support  Oppose	Office Disburs	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  M M O9 O1 O2 O21  Sought:  House District: 02  President Senate State: IA  Sement For:  Primary  General  Other (specify)
VA	Zip Code 20148  Category/ Type  X Support  Oppose	Office Disburs	Amount  145.63  Transaction ID: SE.42007  Date of Disbursement or Obligation  M M O9 O1 O2 O21  Sought:  House District: 02  President Senate State: IA  Sement For:  Primary  General  Other (specify)

TEMIZED INDEPENDENT EXPENDITURES					PAGE 13	
NAME OF COMMITTEE (In Full)						24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC II	DENTIFICAT	TION NUMBER ▼
				C	C0053076	6
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M /	D D /	Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo		M M	/ D D	n/Dissemination
Mailing Address 21850 Inglewood Ct.			Amou	09	20	2021
			Amou	arit.		
City	State	Zip Code				145.63
Ashburn	VA	20148			ID: SE.4200 Irsement or	
Purpose of Expenditure Mailer Production		Category/ Type		M 09	01	2021
Name of Federal Candidate:		Support	Office Soug	ht·	<b>X</b> House	District:07
MURPHY, STEPHANIE, , ,		Coppose Suppose	Presid	_	Senate	State:FL
Colondor Voor To Doto			Disburseme		Prima	
Calendar Year-To-Date Per Election for Office Sought	, , ,	145.63	2022	Other (sp		Ty Contorui
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date			n/Dissemination
Ma-Tan Address			— L	09	20	2021
Mailing Address 21850 Inglewood Ct.			Amou	unt		
City	State	Zip Code				145.63
Ashburn	VA	20148	Tran	saction	ID : SE.420 irsement or	11
Purpose of Expenditure  Mailer Production		Category/ Type		M 09	01	2021
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht:	<b>X</b> House	District:22
NEHLS, TROY, , ,		Oppose	Presid	_	Senate	State: TX
Calendar Year-To-Date			Disburseme	nt For:	Prima	ry 🗶 General
Per Election for Office Sought	7	145.63	2022	Other (sp		
(a) SUBTOTAL of Itemized Independent Expenditures			· •			291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •		1 1 7	
(c) TOTAL Independent Expenditures						
			, L.	- 1	7	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized					
Gross, Jennifer, , ,	Electronically Fil	edl –	M = M /	D D		Y Y Y
	Lacironicuity I'll	Date	9 11	20	20	)21

	PAGE 13	
T		24 OF FORM 3X
FEC II	DENTIFICAT	TION NUMBER ▼
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nsaction	ID: SE.4201 ursement or	12
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ght:	<b>X</b> House	District:01
dent	Senate	State: AZ
ent For:	Primai	ry 🗶 General
Other (sp	oecify) ▶	
of Publi	c Distribution	n/Dissemination
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nsaction of Disbu	w House	Obligation  2021  District: 04  State: UT
nsaction of Disbution 09  ght:  dent  ent For:	W House Senate Primal	Obligation  2021  District: 04  State: UT
ght: Other (sp	W House Senate  Primar  Decify) ▶	Obligation  2021  District: 04  State: UT
nsaction of Disbution 09  ght: dent  control of Disbution 09  ght: Other (sp	House Senate Primar pecify)	Obligation  / 2021  District: 04 State: UT  ry General
msaction of Disbution 09  ght: dent ent For: Other (sp	W House Senate  Primar  Decify) ▶	Obligation  / 2021  District: 04 State: UT  ry General
nsaction of Disbuilding of Disbuildi	W House Senate Primal pecify) ▶	Obligation  / 2021  District: 04 State: UT  ry
ght: Other (sp	House Senate Primal	Obligation  2021  District: 04 State: UT  Ty General
ght: [ dent [ other (sp	House Senate Primal pecify)	Obligation  / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

NIAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORIVI 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.				Amount
City	State	Zip Code		145.63
Ashburn	VA	20148		Transaction ID : SE.42012 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 2021
Name of Federal Candidate:		Support	Office	e Sought:  House District: 01
O'HALLERAN, TOM, , ,		Oppose		President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	, , ,	145.63	Disbu 2022	orsement For: Primary   ✓ General  Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.				Amount
				7 tillouit
City	State	Zip Code		145.63
Ashburn	VA	20148		Transaction ID : SE.42014 Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 01 2021
Name of Federal Candidate:		<b>∡</b> Support	Office	e Sought:   House District: 04
OWENS, BURGESS, , ,		Oppose		President Senate State: UT
Calendar Year-To-Date		145.63	Disbu 2022	ursement For: Primary 🗶 General
Per Election for Office Sought	7		2022	Other (specify) ▶
(a) CUPTOTAL of the reise of he does not death For any distance				201.00
(a) SUBTOTAL of Itemized Independent Expenditures			•	291.26
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Gross, Jennifer, , ,	Electronically File	ed] Date	e 1	1 20 Y Y Y Y Y Y Y Y
Signature				FEC Schedule E (Form 3Y) Rev. 05/2016

TEMIZED INDEPENDENT EXPENDITURE	S			PAGE 136 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.				Amount
City	State	Zip Code		145.63
Ashburn	VA	20148		Transaction ID : SE.42016 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 / 2021
Name of Federal Candidate:		Support	Office	Sought:  House District: 01
PAPPAS, CHRIS, , ,		Cupport Oppose		□ N⊔
		• • • • • • • • • • • • • • • • • • • •		Fresident State.
Calendar Year-To-Date Per Election for Office Sought	7 7	145.63	2022	sement For: Primary   General  Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				M M / D D / Y Y Y Y Y Y 2021
Mailing Address 21850 Inglewood Ct.				Amount
City	State	Zip Code		291.26
Ashburn	VA	20148		Transaction ID : SE.42018  Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought:  House District: 12
PELOSI, NANCY, , ,		<b>x</b> Oppose		President Senate State: CA
Calendar Year-To-Date		291.26		sement For: Primary K General
Per Election for Office Sought	7 7	231.20	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	9S		•	436.89
(b) SUBTOTAL of Unitemized Independent Expendit	ures		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any canding party committee) any political party committee or it	date or authorized	•		• • • • • • • • • • • • • • • • • • • •
Gross, Jennifer, , ,	[Electronically Fil	led]	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signatura		Date	11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 137 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.				mount
- Oil		l =: 0 :		
City Ashburn	State VA	Zip Code 20148	L	145.63 ransaction ID : SE.42020
Purpose of Expenditure Mailer Production	V/\	Category/		ate of Disbursement or Obligation
		Type		09 01 2021
Name of Federal Candidate:		<b>x</b> Support	Office So	ought:   House District: 10
PERRY, SCOTT, , ,		Oppose	Pr	esident Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disburse 2022	ment For:  Primary
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.			Aı	mount
City	State	Zip Code		145.63
Ashburn	VA	20148		ransaction ID : SE.42022 ate of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: X House District: 45
PORTER, KATHERINE, , ,		<b>x</b> Oppose	Pr	esident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	145.63	Disburse 2022	ment For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures				291.26
			_	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed1 -	M = M	/ D D / Y Y Y Y
Signature	incany 1 ll	_ Date	e 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 138 OF 149
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC			l r	EC IDENTIFICATION NUMBER ▼
			L	C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	М	
Mailing Address 21850 Inglewood Ct.			Amount	9 20 2021
City	State	Zip Code		291.26
Ashburn	VA	20148		ction ID : SE.42024 Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	M 0	
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	House District: 00
PORTMAN, ROB THE HONORA, , ,		Oppose	Presiden	
Colondon Voca To Doto			Disbursement I	
Calendar Year-To-Date Per Election for Office Sought	7	291.26	2022	er (specify)
Full Name of Payee		Memo		Public Distribution/Dissemination
Tradewinds Consulting, Inc.				M / D D / Y Y Y Y
Mailing Address				9 20 2021
21850 Inglewood Ct.			Amount	
City	State	Zip Code		145.63
Ashburn	VA	20148		ction ID : SE.42026
Purpose of Expenditure	٧٨	20140	Date of	Disbursement or Obligation
Mailer Production		Category/ Type	M 0	
Name of Federal Candidate:		<b>x</b> Support	Office Sought:	₩ House District: 21
ROY, CHIP, , ,		Oppose	Presiden	
Calendar Year-To-Date		145.63	Disbursement I	For: Primary X General
Per Election for Office Sought	7 7		Oth	er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			<b>&gt;</b>	436.89
(b) SUBTOTAL of Unitemized Independent Expenditure	es		<b>.</b>	
(c) TOTAL Independent Expenditures			<b>•</b>	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	Electronically Fil	ed] Date	M M / I	20 / 2021

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 139 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
				C 200330700
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 / 20 / 2021
Mailing Address 21850 Inglewood Ct.				Amount
City	State	Zip Code		436.89
Ashburn	VA	20148		Transaction ID : SE.42027 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 2021
Name of Federal Candidate:		<b>✗</b> Support	Office	e Sought: House District: 00
RUBIO, MARCO, , ,		Oppose		President Senate State: FL
Calendar Year-To-Date		420.00		ursement For: Primary
Per Election for Office Sought	7 7	436.89	2022	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				09 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.				
				Amount
City	State	Zip Code		145.63
Ashburn	VA	20148		Transaction ID : SE.42029  Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 01 / 2021
Name of Federal Candidate:		<b>✗</b> Support	Office	e Sought:   House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose		President Senate State: FL
Calendar Year-To-Date		145.62		ursement For: Primary X General
Per Election for Office Sought	7 7	145.63	2022	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	s			582.52
(b) SUBTOTAL of Unitemized Independent Expendit	ures			
(c) TOTAL Independent Expenditures				
(b) 10 112 maspandom Expandidade				
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	late or authorized			
Gross, Jennifer, , ,	[Electronically Fi	led1 –	М	M / D D / Y Y Y Y Y
Signature	I I	Date	e 1	1 20 2021

TEMIZED INDEPENDENT EXPENDITURE	S			PAGE 140 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 21850 Inglewood Ct.				09 20 2021
21030 Higiewood Ct.				Amount
City	State	Zip Code		145.63
Ashburn	VA	20148	I	Transaction ID : SE.42031
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
Mailer Production		Type		09 01 2021
Name of Federal Candidate:		<b>X</b> Support	Office	Sought: House District: 05
SCHRADER, KURT, , ,		Oppose		President Senate State: OR
				sement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		145.63	2022	Other (specify)
Full Name of Payee	,	Memo	Itom	Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.		□ INICITIO	Item	M M / D D / Y Y Y Y
Mailing Address				09 20 2021
Mailing Address 21850 Inglewood Ct.				Amount
City	State	Zip Code		145.63
Ashburn				Transaction ID : SE.42033
	VA	20148		Date of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		09 / 01 / 2021
Name of Federal Candidate:		Support	Office	Sought:  House District: 08
SCHRIER, KIM DR., , ,		<b>x</b> Oppose		President Senate State: WA
Calendar Year-To-Date			Disbur	sement For: Primary 🗶 General
Per Election for Office Sought		145.63	2022	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditure	əs			291.26
				7
(b) SUBTOTAL of Unitemized Independent Expendit	tures		. •	
(c) TOTAL Independent Expenditures				
(6) 13 112 113 113 113 113 113 113 113 113				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candiparty committee) any political party committee or it	date or authorized			
Gross, Jennifer, , ,	[Electronically Fi	Tod1	M =	M / D D / Y Y Y Y Y
• • • • • • • • • • • • • • • • • • • •	[Electronically Fil	ieuj Dot	. 11	20 2021

TEMIZED INDEPENDENT EXPENDITURES						49
NAME OF COMMITTEE (In Full)					OR LINE 24 OF FORM	
WOMEN SPEAK OUT PAC				FEC IDEN	ITIFICATION NUMBE	R▼
WOMEN OF EARL OUT TAKE				C	00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / [	D D / Y Y Y	Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo		M /	istribution/Dissemination	
Mailing Address 21850 Inglewood Ct.			Amou	09 nt	20 2021	
			7411041			-
City	State	Zip Code		-	145.63	3
Ashburn	VA	20148		action ID : of Disburse	SE.42035 ment or Obligation	
Purpose of Expenditure Mailer Production		Category/ Type	N	09 /	01 / 2021	Y
Name of Federal Candidate:		Support	Office Sough	t·	House District: 0	0
SCHUMER, CHARLES E., , ,		Capport Oppose	Preside			IY
Colondor Very To Data			Disbursemen		Primary	neral
Calendar Year-To-Date Per Election for Office Sought	7	145.63	2022 —	ther (speci		iciai
Full Name of Payee		☐ Memo	Item Date of	of Public D	istribution/Disseminatio	on
Tradewinds Consulting, Inc.			N		D D / Y Y Y	Y
Mailing Address 21850 Inglewood Ct.			L	09	20 2021	
21850 Inglewood Ct.			Amou	nt		
City	State	Zip Code	ΗГ:		145.63	3
Ashburn	VA	20148	Trans	saction ID		_
Purpose of Expenditure		Catagony		of Disburse	ment or Obligation	
Mailer Production		Category/ Type		09	01 2021	
Name of Federal Candidate:		<b>x</b> Support	Office Sough	t: <b>X</b> I	House District:0	06
SCHWEIKERT, DAVID S., , ,		Oppose	Preside	ent :	Senate State: A	Z
Calendar Year-To-Date			Disbursemen	t For:	Primary <b>X</b> Gen	neral
Per Election for Office Sought	T	145.63	<sup>2022</sup>	ther (speci		
•						
(a) SUBTOTAL of Itemized Independent Expenditures					291.26	
				,	9	_
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •			
(c) TOTAL Independent Expenditures						
•				7	7	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized					
Gross, Jennifer, , ,	Electronically Fil	od1	M = M /	D D /	Y	
	<u> гасионициу Г</u> и	Date	9 11	20	2021	

SCHEDULE E (FEC FORM 3X) TEMIZED INDEPENDENT EXPENDITURES				PAGE 142 OF 149
NAME OF COMMITTEE (L. F. II)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOWEN SPEAK OUT FAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address 21850 Inglewood Ct.			A	mount
City	State	Zip Code		291.26
Ashburn	VA	20148	T	ransaction ID : SE.42039 ate of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type		09 01 / 2021
Name of Federal Candidate:		<b>X</b> Support	Office S	ought: House District:00
SINEMA, KYRSTEN, , ,		Oppose	Pr	resident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 1 7	1165.05	Disburse 2022	ement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee Tradewinds Consulting, Inc.  Mailing Address		☐ Memo	Item D	ate of Public Distribution/Dissemination
21850 Inglewood Ct.			A	mount
City	State	Zip Code		145.63
Ashburn	VA	20148		Fransaction ID : SE.42040 ate of Disbursement or Obligation
Purpose of Expenditure  Mailer Production		Category/ Type		M M O9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: 🗶 House District:08
SLOTKIN, ELISSA, , ,		<b>x</b> Oppose	Pr	resident Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	7	145.63	Disburse 2022	ement For: Primary <b>X</b> General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3		. [	436.89
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>•</b> [	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gross, Jennifer, , ,	[Electronically Fil	ded] Date	M = M 11	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 143 OF 149 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
WOMEN SPEAK OUT PAC				C C00530766			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y			
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo		of Public Distribution/Dissemination			
Mailing Address 21850 Inglewood Ct.				09 20 2021 Amount			
City	State	Zip Code		145.63			
Ashburn	VA	20148		Transaction ID : SE.42042 Date of Disbursement or Obligation			
Purpose of Expenditure Mailer Production				09 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate:		Support	Office Sough	it: X House District: 07			
SPANBERGER, ABIGAIL, , ,		<b>✗</b> Oppose	Preside				
Calendar Year-To-Date		145.63	Disbursemen	t For: Primary 🗶 General			
Per Election for Office Sought	7 7	143.03	<sup>2022</sup>	Other (specify) ►			
Full Name of Payee				Date of Public Distribution/Dissemination			
Mailing Address 21850 Inglewood Ct.			Amou	Amount			
City	State	Zip Code		145.64			
Ashburn	sshburn VA 20148			Transaction ID : SE.42044  Date of Disbursement or Obligation  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Purpose of Expenditure  Mailer Production							
Name of Federal Candidate:		Support	Office Sough	it: 📕 House District:11			
STEVENS, HALEY, , ,		<b>x</b> Oppose	Preside	President Senate State: MI			
Calendar Year-To-Date Per Election for Office Sought	145.64			oursement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures			· •	291.27			
(b) SUBTOTAL of Unitemized Independent Expenditures							
(c) TOTAL Independent Expenditures			<b>•</b>				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized						
Gross, Jennifer, , ,	Electronically Fil	'ed1 -	M = M /	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature		Date	11	20 2021			

TEMIZED INDEPENDENT EXPENDITURES			PAGE 144 OF 149			
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X			
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼			
			C C00530766			
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D / Y Y Y Y Y			
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo Ite	Date of Public Distribution/Dissemination  09  Date of Public Distribution/Dissemination			
Mailing Address 21850 Inglewood Ct.	Mailing Address 21850 Inglewood Ct.					
City	State	Zip Code	145.64			
Ashburn	VA	20148	Transaction ID : SE.42047 Date of Disbursement or Obligation			
Purpose of Expenditure Mailer Production		Category/ Type	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate:		<b>X</b> Support	Office Sought:   M House District: 22			
TENNEY, CLAUDIA, , ,		Oppose	President Senate State: NY			
Calendar Year-To-Date Per Election for Office Sought	<b>7</b> 1 1 <b>7</b>		Disbursement For:  Primary  General   022  Other (specify) ▶			
Full Name of Payee			Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 21850 Inglewood Ct.	Amount					
City	State	Zip Code	145.64			
Ashburn	VA	20148	Transaction ID : SE.42049  Date of Disbursement or Obligation			
Purpose of Expenditure  Mailer Production		Category/ Type	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate: TESTER, JON, , ,			Office Sought: House District: 00			
TESTER, JON, , ,		Oppose	President X Senate State: MT			
Calendar Year-To-Date Per Election for Office Sought	T T	445.04	Disbursement For:  Primary  General   2022  Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures			291.28			
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures			<b>&gt;</b>			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•				
Gross, Jennifer, , ,	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					

TEMIZED INDEPENDENT EXPENDITURES			PAGE 145 OF 149			
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X			
WOMEN SPEAK OUT PAC			FEC IDENTIFICATION NUMBER ▼			
			C C00530766			
Check if 24-hour report 48-hour report	New repo	ort Amends repor	rt filed on			
Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo I	Item Date of Public Distribution/Dissemination			
Mailing Address 21850 Inglewood Ct.	Amount					
City	State	Zip Code	145.64			
Ashburn	VA	20148	Transaction ID : SE.42050  Date of Disbursement or Obligation			
Purpose of Expenditure Mailer Production		Category/ Type	09 / D1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate:		<b>✗</b> Support	Office Sought: House District: 00			
TILLIS, THOM R. SEN., , ,		Oppose	President Senate State: NC			
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	291.27	Disbursement For: ☐ Primary <b>X</b> General 2022 ☐ Other (specify) ▶			
Full Name of Payee Tradewinds Consulting, Inc.			Item Date of Public Distribution/Dissemination			
Mailing Address 21850 Inglewood Ct.	Mailing Address 21850 Inglewood Ct.					
City	State	Zip Code	291.26			
Ashburn	VA	20148	Transaction ID : SE.42051  Date of Disbursement or Obligation			
Purpose of Expenditure  Mailer Production		Category/ Type	09 / 01 / 2021			
Name of Federal Candidate:		<b>✗</b> Support	Office Sought: House District: 00			
TOOMEY, PATRICK JOSEPH, , ,		Oppose	President			
Calendar Year-To-Date Per Election for Office Sought		291.26	Disbursement For:			
(a) SUBTOTAL of Itemized Independent Expenditures	·		<b>436.90</b>			
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures			<b>&gt;</b>			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•				
Gross, Jennifer, , ,	11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					

IEMIZED INDEPENDENT EXPEN	IDITURES		PAGE 146 OF 149 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC			C C00530766
Check if 24-hour report 48-hou	r report New repo	ort Amends repo	ort filed on M M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Tradewinds Consulting, Inc.  Mailing Address 24050 Included Ct.			09 / 20 / Y Y Y Y Y Y
21850 Inglewood Ct.			Amount
City	State	Zip Code	145.64
Ashburn	VA	20148	Transaction ID : SE.42055 Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:  House District: 14
UNDERWOOD, LAUREN, , ,		<b>x</b> Oppose	President Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		145.64	Disbursement For: Primary General 2022
5 II N ( )			Other (specify)
Full Name of Payee Tradewinds Consulting, Inc.			M M / D D / Y Y Y Y
Mailing Address			09 20 2021
21850 Inglewood Ct.			Amount
City	State	Zip Code	145.64
Ashburn	VA	20148	Transaction ID : SE.42056  Date of Disbursement or Obligation
Purpose of Expenditure Mailer Production		Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Sought: X House District: 21
VALADAO, DAVID, , ,		Oppose	President Senate State: CA
Calendar Year-To-Date		145.64	Disbursement For: Primary
Per Election for Office Sought	1 1 1 1 1	145.64	2022
(a) SUBTOTAL of Itemized Independent	Expenditures		291.28
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		. >
(c) TOTAL Independent Expenditures			
			,
	, any candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Gross, Jennifer, , ,	[Electronically File	ed] Date	e 11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	<del>-</del>	_ Date	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 147 OF 149	
			İ	FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			F	FEC IDENTIFICATION NUMBER ▼	
WOWEN SPEAK OUT FAC				C C00530766	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y	
Full Name of Payee Tradewinds Consulting, Inc.	☐ Memo	Memo Item Date of Public Distribution/Dissemination			
Mailing Address 21850 Inglewood Ct.	Mailing Address 21850 Inglewood Ct.				
City	State	Zip Code		145.64	
Ashburn	VA	20148		ction ID : SE.42058 Disbursement or Obligation	
Purpose of Expenditure Mailer Production		Category/ Type		99 01 2021	
Name of Federal Candidate:		<b>X</b> Support	Office Sought:	¥ House District: <u>24</u>	
VAN DUYNE, ELIZABETH ANN, , ,		Oppose	Presider		
Calendar Year-To-Date Per Election for Office Sought	, , ,	145.64	Disbursement 2022 Oth	For:	
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address 21850 Inglewood Ct.	Mailing Address 21850 Inglewood Ct.				
City Ashburn	State VA	Zip Code 20148	I	145.64 Inction ID : SE.42059 Disbursement or Obligation	
Purpose of Expenditure Mailer Production		Category/ Type	М	99 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	₩ House District:02	
WAGNER, ANN L., , ,		Oppose	Presider	senate State: MO	
Calendar Year-To-Date Per Election for Office Sought	7	145.64	Disbursement 2022 Oth	For: Primary <b>X</b> General ner (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	\$		· []	291.28	
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures			<b>•</b>		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
Gross, Jennifer, , ,	M = M / 11	20 / 2021			

	MIZED INDEPENDENT EXPENDITURES				PAGE	148 OF 149		
NAN	ME OF COMMITTEE (In Full)					NE 24 OF FORM 3X		
	OMEN SPEAK OUT PAC				1	CATION NUMBER ▼		
					C C0053	0766		
Che	eck if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D	/ Y = Y = Y		
	Full Name of Payee Tradewinds Consulting, Inc.		☐ Memo	Item Date	M M / D L			
	Mailing Address 21850 Inglewood Ct.			Amo	09 20 unt	2021		
	City	State	Zip Code			436.89		
	Ashburn	VA	20148		saction ID : SE.4 of Disbursement			
	Purpose of Expenditure Mailer Production		Category/ Type		M M / D D D D D D D D D D D D D D D D D	_		
	Name of Federal Candidate:		Support	Office Soug	aht: Hous	e District: 00		
	WARNOCK, RAPHAEL, , ,		<b>✗</b> Oppose	Presi		te State: GA		
	Calendar Year-To-Date Per Election for Office Sought	7	436.89	Disburseme	ent For: Pr Other (specify) ▶	imary <b>X</b> General		
Full Name of Payee				Date of Public Distribution/Dissemination  09  09  09  09  00  00  00  00  00  0				
	Mailing Address 21850 Inglewood Ct.			Amo	Amount			
	City	State	Zip Code		145.64  Transaction ID : SE.42061  Date of Disbursement or Obligation			
Ashburn		VA	20148					
	Purpose of Expenditure Mailer Production		Category/ Type		09 / 01	2021		
	Name of Federal Candidate:		Support	Office Sou	ght: X House	e District:07		
	WILD, SUSAN, , ,		<b>x</b> Oppose	Presi	dent Sena	te State: PA		
	Calendar Year-To-Date Per Election for Office Sought	7	145.64	Disburseme	ent For: Pr Other (specify) ▶	imary 🗶 General		
(;	a) SUBTOTAL of Itemized Independent Expenditures	<b></b>		<b>.</b> []		582.53		
(b) SUBTOTAL of Unitemized Independent Expenditures								
(a) 665161712 of Officering of Experiority Control of C								
(	c) TOTAL Independent Expenditures			<b>•</b>				
W	Under penalty of perjury I certify that the independent vith, or at the request or suggestion of, any candidates array committee) any political party committee or its	ate or authorized						
Gross, Jennifer, , , [Electronically Filed] Date 11				M = M /	20 / Y	2021		

### SCHEDULE E (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES PAGE 149 OF 149 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee Tradewinds Consulting, Inc. 20 2021 Mailing Address 21850 Inglewood Ct. Amount City State Zip Code 145.64 VA 20148 Transaction ID: SE.42157 Ashburn Date of Disbursement or Obligation Purpose of Expenditure Category/ Mailer Production 09 01 2021 Type Name of Federal Candidate: 48 **X** Support Office Sought: **X** House District: STEEL, MICHELLE, , , CA Oppose President State: Senate Disbursement For: Primary **X** General Calendar Year-To-Date 145.64 2022 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate: Support Office Sought: House District: Oppose President Senate State: Disbursement For: General Primary Calendar Year-To-Date Per Election for Office Sought Other (specify) ▶ 145.64 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures ..... 31155.56 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gross, Jennifer, , , [Electronically Filed] 20 2021 Date